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THE REGISTERED NURSE POPULATION

Findings from the National Sample Survey of Registered Nurses, March 1992

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
Public Health Service
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Evelyn B. Moses Chief, Nursing Data and Analysis Staff Division of Nursing

PREFACE

The Division of Nursing provides national leadership to assure an adequate supply and distribution of qualified nursing personnel to meet the health needs of the Nation. To assist in carrying out this responsibility, the Division obtains data on a continuing basis to determine the current and projected supply and distribution of and requirements for nurses within the United States and within each State. This report provides a summary of the data on the number and characteristics of the registered nurse population from the 1992 national sample survey of registered nurses.

To accomplish its mission, the Division of Nursing developed a design for collecting data for sample surveys of registered nurses in this country. In July 1975 the Division initiated an investigation into methodological approaches to obtaining data on the registered nurse population using sampling techniques. That design, prepared under contract by Westat, Inc., has formed the basis for each subsequent study in the series. The data collected in these sample surveys are the major source of comprehensive data on the personal and professional characteristics of all those with current licenses to practice as registered nurses in the United States, whether or not they are employed in nursing. Sample survey studies were conducted in September 1977, November 1980 and 1984, and March 1988 and 1992.

The Research Triangle Institute collected the data for this study through a contract. The report was authored by Evelyn B. Moses, Chief, Nursing Data and Analysis Staff, Division of Nursing. John O'Donnell assisted in developing and preparing the summary tables. Dena Saunders and Leona Adams provided secretarial assistance and Marjorie Hamilton provided other technical assistance. The Division of Nursing is pleased to make this publication available.

Marla E. Salmon, ScD, RN, FAAN Director Division of Nursing Bureau of Health Professions, HRSA, DHHS

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Chapter I

Introduction

A key component in the delivery of health care to the population is the availability of an appropriate supply of health care providers. Registered nurses are the largest group of health care providers. They function throughout the health care delivery system with a variety of responsibilities and roles. Periodic surveys are carried out to assess the number and characteristics of the registered nurse population and to assist in the evaluation of trends in the availability of nursing resources. This report summarizes the fifth in a series of such studies.

The data for these studies are collected from registered nurses through the means of a mail questionnaire to a sample of individuals with current licenses to practice as registered nurses at the time of the study. The design for the data collection was developed in the 1970s as a result of a contract the Division of Nursing had with Westat, Inc., a survey research firm.

The study was developed to satisfy the need for data on the country as a whole and in each State as well as the need for data on subgroups of nurses such as those with advanced degrees or specialized training. The study design was initiated at a time when Congress passed legislation calling for data on the current and future supply and distribution of and requirements for nursing personnel, including registered nurses, registered nurses with advanced degrees, and nurse practitioners, for the United States and within States (Section 951 of P.L. 94-63 (42 USC 296 note)). The legislation also called for the continued monitoring of the nurse population to determine the numbers of nurses who are employed or not in each State; the numbers working full- or parttime, their practice settings and positions, and their compensation levels; and those with advanced training according to the types of specialties for which they were prepared.

The data collection instruments for these studies respond to the data requirements identified in the legislation. The information gained from the studies provides necessary data for developing projections of the supply and distribution of and requirements for registered nurses. It also directly responds to the specific data areas cited by Congress. In addition, each time the survey is carried out, current areas of particular importance are incorporated in the survey instrument. Care is taken, however, to ensure that the information collected from study to study provides sufficient continuity so that an evaluation can be made of trends in nursing resources.

No single, unduplicated, list of individuals who have licenses as registered nurses in the country from which a sample may be selected exists. Therefore, the survey universe is the licenses to practice as registered nurses issued in each of the 50 States and the District of Columbia. The survey methodology used to select the sample and that which is used in the subsequent weighting of each sample member's response take account of the fact that nurses may hold licenses to practice in more than one State. Therefore, the resultant data provides a description of individuals who have current licenses to practice as registered nurses regardless of the number of licenses they may hold. Based on the data in this study, in March 1992, the over 2,570,000 licenses to practice as registered nurses in existence in the United States were held by about 2,254,000 individuals.

The sample selection and data collection and processing of this study was carried out by the Research Triangle Institute under a contract with the Division of Nursing. A total of 45,130 licenses were selected for the sample. An initial elimination of duplicate licenses led to the mailing of 43,629 questionnaires. After taking account of additional duplicates and sample selection errors, the overall response rate to the study was 79.7 percent. A total of 32,489 individual nurse responses were used to derive the data in this study.

To ensure an adequate response to the survey, a number of mailouts and a telephone followup to those who had not responded by mail are made. Particular efforts are made to obtain correct addresses for those questionnaires returned because the nurse could not be located at the address given. In addition to the efforts to reduce nonresponse to the survey, careful screening of the responses is undertaken to minimize ambiguous reponses or nonresponses to individual questions.

The survey questions are prioritized in terms of their importance to the overall data base on registered nurses, and the degree to which the question may be of a sensitive nature, and a response rate goal is established for each question. Individual respondents may be called to clarify the response made or to obtain the missing data based on the priority rank of the question for which such information is needed. If a question of high priority rank needs followup, then all other items on the study which include ambiguous or missing information are covered in the followup telephone call. All respondents to the survey have to be classified as to whether they are employed in nursing or not. Each respondent is also classified according to "location" State.

In addition to the identification and followup of missing data, the editing procedures for the study call for a review of the items specified in the "other" categories within the questions. Those that can are reclassified to already stated categories. The remaining responses are examined to determine whether the number of

respondents providing a particular response is large enough to warrant a separate itemization of the response.

The substantial data base available from this study can be a source of many different types of analyses and uses. This report provides an overview of the characteristics of the more than 2.2 million registered nurse population. A series of detailed tables describing the data generated by this March 1992 survey is included in Appendix A.

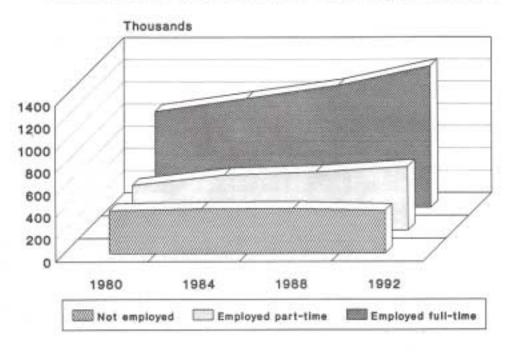
The body of the report consists of a chapter which summarizes the findings from the study and makes some comparisons to prior studies in the series. The summary primarily concentrates on the characteristics of the nurses in the country as a whole but some brief descriptive data are included on the nurse population in each State and region within the country. In addition, the report contains a chapter which highlights a number of the major trends noted in the number and characteristics of the nurse population. A review of the statistical techniques used in sample selection, response weighting and identification of sample errors is included in Appendix B and the survey instrument can be found in Appendix C.

Chapter II

An Overview of the Registered Nurse Population

Since the start of this series of studies the number of registered nurses in the country has shown continual increase. In March 1992, an estimated 2,239,816 individuals located in the United States held licenses to practice as registered nurses, an increase of 35 percent since November 1980. The number who were employed in nursing increased at a higher rate. In November 1980, about 77 percent, or 1,272,851 registered nurses, were employed in nursing. In March 1992, almost 83 percent, or 1,853,024, were working in nursing positions. The number of those working on a full-time basis increased at a faster rate than those working on a part-time basis. Full-time employed nurses alone totalled 1,275,947 in 1992, more than the total employed nurses, including both full- and part-timers, in 1980.

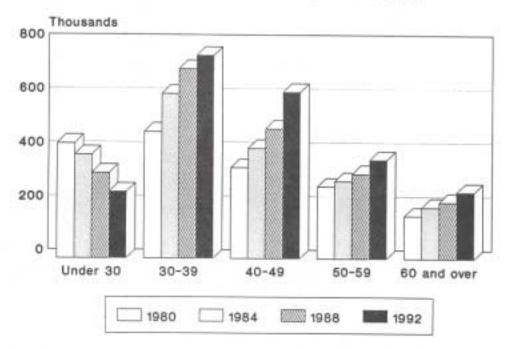
Chart 1. REGISTERED NURSE POPULATION BY NURSING EMPLOYMENT STATUS, 1980-1992



Although the registered nurse population primarily consists of women, an increasing proportion of the RNs are men. Four percent of the RN population in 1992 were men. The 97 percent increase in the number of male nurses between 1980 and 1992 is almost three times greater than the 35 percent increase in the total RN population.

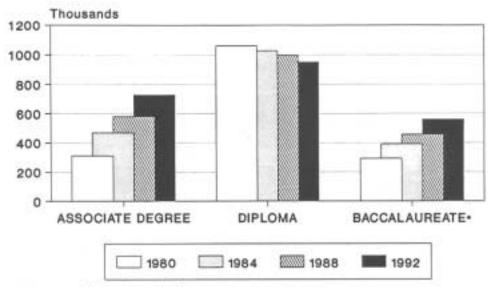
- About 9 percent of the RN population in March 1992, or 203,835 RNs, were racial/ethnic minorities. Of these, 90,611 were black (nonHispanic); 75,785 were Asian/Pacific Islanders; 30,441, Hispanic, and 9,988, American Indian/ Alaskan Native.
- Seventy-two percent of the RNs were married. About 55 percent had children living at home. Over 20 percent had children under the age of 6. Whether married or not and with children or not, the overwhelming majority were employed in nursing. However, married nurses with children, particularly those with young children, were more likely to work on a part-time basis.
- The age level of RNs has increased continually in the time period covered by these survey. Decreasing numbers of nurses were under the age of 30. The average age increased from 40.3 in November 1980 to 43.1 in March 1992.

Chart 2. AGE DISTRIBUTION OF REGISTERED NURSE POPULATION, 1980-1992



- About 385,000 of the 2,239,816 RNs in the country had been licensed practical nurses or had post-high school academic degrees prior to entering the educational program that prepared them to become RNs. Those who had become RNs in more recent years were more likely to have had post-high school academic degrees or to have been licensed practical nurses.
- Only 42.5 percent of the RN population in March 1992 had received their preparation to become RNs in a diploma program in contrast to November 1980 when about two-thirds of the nurses had graduated from diploma programs. The numbers coming from associate degree programs showed greater growth than the numbers from baccalaureate programs.

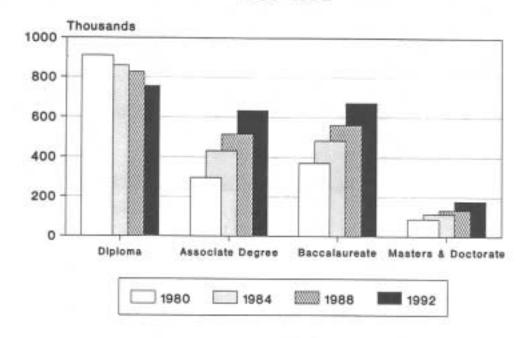
Chart 3. BASIC NURSING EDUCATION OF REGISTERED NURSE POPULATION 1980-1992



 Includes some R.N.s whose basic nursing education was in a master's or doctoral program.

Taking all the nursing education the nurses had into account, their basic as well as any post-basic education, in 1992, about 34 percent had a diploma as their highest educational level compared to almost 55 percent in 1980. Between 1980 and 1992, the proportion of all the RNs with associate degrees as their highest level of nursing education increased from about 18 percent to 28 percent. Those with baccalaureates from 22 percent to 30 percent. About 8 percent of the nurses in 1992 had at least a master's degree compared to 5 percent in 1988.

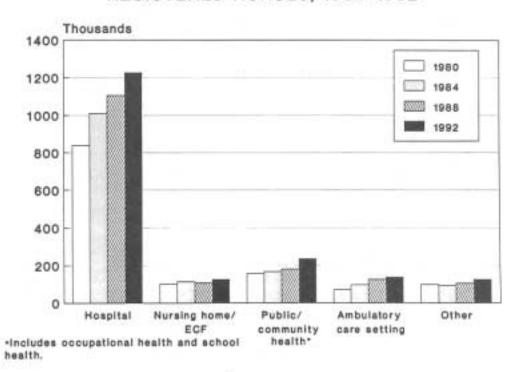
Chart 4. HIGHEST EDUCATIONAL PREPARATION OF REGISTERED NURSE POPULATION 1980-1992



- The primary focus of the degree for about 43 percent of the RNs with post-basic nursing education master's degrees was advanced clinical practice. Twenty-four percent had majored in supervision/administration and 22 percent in education. Doctoral degrees were mainly focussed on either education or research. Supervision/administration and clinical practice was the focus of the doctorates for far fewer nurses.
- About 8 percent of the 2,239,816 RNs in March 1992 were enrolled in a formal education program leading to a nursing or nursing-related degree. This is both a numeric and relative decrease since the March 1988 study. In 1988, about 9.5 percent of the RNs at that time were participating in post-RN academic programs. Earlier studies in the series also showed about the same proportion of attendees among their nurse populations as in the 1988 study.

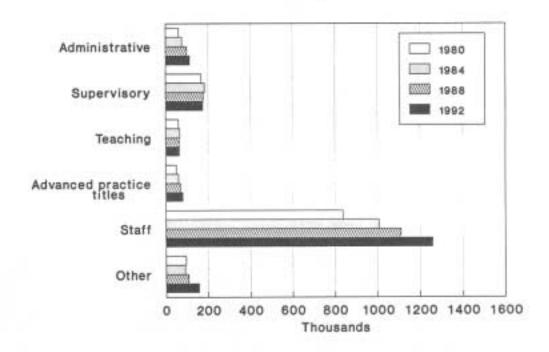
- While registered nurses can be found in all parts of the health care system the predominant employment setting is that of the hospital. In March 1992, 66.5 percent of the 1,853,024 employed nurses worked in hospitals. The proportion of the total employed nurse supply who were in hospitals declined somewhat in 1992 from the proportion in prior studies but the number of those who were in the hospital setting has continually increased. However, while the majority of nurses in hospitals are working in in-patient bed units, in recent years, increases in employment in hospitals were more likely found in areas other than these units. Between 1988 and 1992, the number of registered nurses providing patient care services in in-patient bed units increased about 6 percent compared to an increase of about two-thirds in the number providing patient care services in outpatient departments and about 17 percent in those in operating or labor/delivery rooms or in post-operative recovery rooms.
- Nursing homes had the smallest increase in numbers of RNs among the various types of employment settings between 1980 and 1992 while ambulatory care settings had the largest proportionate increase in the number of nurses. However, between 1988 and 1992, the public/community health area showed a relatively large increase in the number of nurses, to a large extent, due to those working in non-hospital-based home health care such as visiting nursing services or other home health agencies.

Chart 5. EMPLOYMENT SETTINGS OF REGISTERED NURSES, 1980-1992



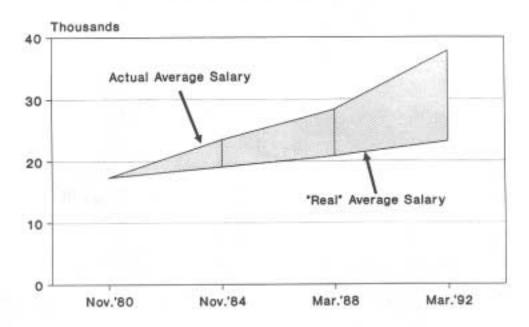
- About 31 percent of the employed RNs were working on a part-time basis in 1992. The percentage varied according to employment setting. The highest proportion of part-timers was found among those who were working in ambulatory care settings, 39 percent and the lowest among those in occupational health or student health services, about 24 percent in each.
- About two-thirds of all employed nurses in 1992 were in staff level positions similar to what was found in prior studies. Supervisory positions, such as head nurses or supervisors, are a declining proportion of the nursing positions. Despite the increases in the total number of employed nurses, the number of those in supervisory positions decreased between 1984 and 1992.

Chart 6. TYPES OF POSITIONS OF REGISTERED NURSES, 1980-1992



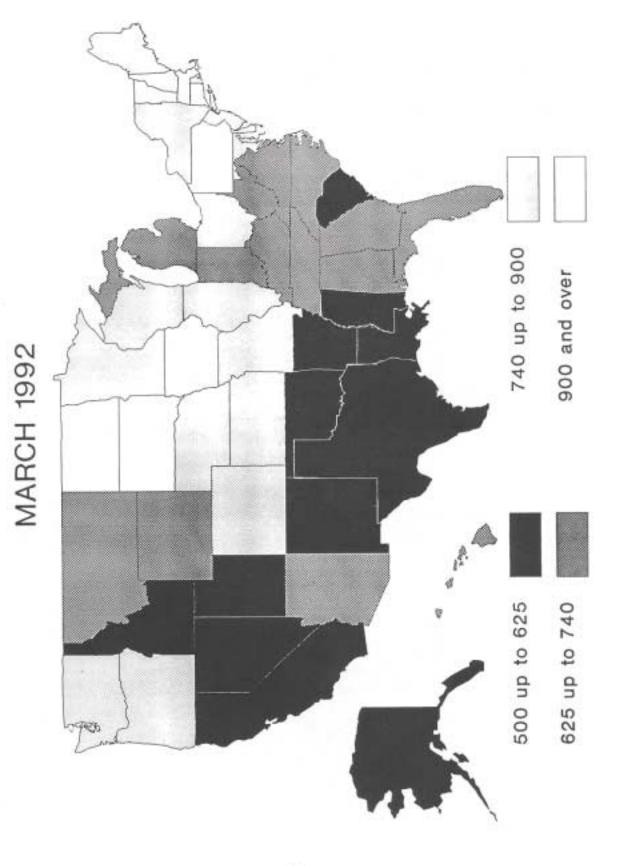
As was the case in the prior studies, registered nurses were predominately involved in direct patient care activities. Sixty-nine percent of the employed nurses in 1992 spent at least 50 percent of their usual workweek in direct patient care activities. The majority of the nurses (52 percent) spent at least 75 percent of their time in such activities. In March 1992, the average annual salary of a full-time employed nurse was \$37,738, a 117 percent increase since November 1980 when the average salary was \$17,398. However, when inflation is considered, the increase over that period was only 33 percent.

Chart 7. ACTUAL AND "REAL" AVERAGE ANNUAL SALARIES OF FULL-TIME RNs, November 1980-March 1992



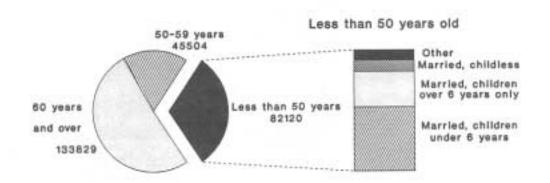
In March 1992, there were 726 employed registered nurses per 100,000 population in the country. In line with previous studies, the New England area of the country had the highest concentration of employed nurses in relation to the population of the area. Typically, the West South Central area had the lowest concentration. On an individual State by State basis, wide variation can be seen. The ratio of employed nurses to the population among the 50 States ranged from 513 per 100,000 people in Mississippi to 1,063 in Massachusetts. However, while Massachusetts had the highest ratio of employed nurses per 100,000 population in 1992, the actual number of nurses employed in the State declined between 1988 and 1992 from 68,255 to 63,751. The ratio of employed nurses per 100,000 population in Massachusetts in 1988 was 1,167.

Chart 8. EMPLOYED R.N.s PER 100,000 POPULATION



- In March 1992, 386,791 RNs were not employed in nursing. They represented 17 percent of the 2,239,816 RNs in the country, the lowest proportion since the study series started. Some portion of these nurses were employed in non-nursing positions and/or were actively seeking nursing employment. But the largest portion were not working nor seeking employment as a nurse.
- Among the more than 2.2 million RNs in the country in 1992, 1.3 percent were not employed in nursing but were actively seeking nursing employment. This rate was the lowest found among all the studies in the series.
- In March 1992, 4.2 percent of the registered nurse population were employed in non-nursing positions and not looking for a nursing position. This represented a decrease since the 5.3 percent in March 1988.
- Those who were neither employed in a non-nursing position or looking for nursing employment, 12 percent of the 2.2 million RNs, were most likely to be from the older segments of the nurse population. Half of them were at least 60 years old. More than half of those who were under the age of 50 were married with young children in their home.

Chart 9. DISTRIBUTION OF INACTIVE REGISTERED NURSES, MARCH 1992



Chapter III

Characteristics of the Registered Nurse Population

A. The Population as a Whole

In March 1992 an estimated 2,254,393 individuals had current licenses to practice as registered nurses (RNs) in the United States. Of these, 2,239,816 were located in this country and 14,577 were located outside the 50 States and the District of Columbia. The data in this report focuses on the RNs who were located in this country. Nurses were considered to be located in the country if they were employed in nursing in or, if they were not employed in nursing, they were residents of one of the 50 States or the District of Columbia.

RNs may maintain licenses to practice although they are not employed in nursing. This study demonstrates that a substantial proportion of the licensees are employed in nursing. Eighty-three percent of the 2,239,816, or an estimated 1,853,024, were employed in nursing.

Gender

Four percent of the 2,239,816 RNs located in the United States, or 88,623, were men (see Appendix A, Table 1). Among those who were employed in nursing, 4.3 percent were men. While the RN population is primarily composed of women, the number of male RNs grew at a faster rate than the total number of RNs. The 97 percent increase in the number of male RNs is almost three times greater than the 35 percent increase in the total RN population between November 1980 and March 1992.

Racial/Ethnic Background

Based on the data in this March 1992 study, about 9 percent of the total RN population, or an estimated 206,835 RNs came from racial/ethnic minority backgrounds. Of these, 90,611 were black (nonHispanic); 75,785 were Asian/Pacific Islanders; 30,441, Hispanic, and 9,988, American Indian/Alaskan Native (see Appendix A, Table 1).

Although comparisons with data from prior studies in this series show changes in the number and the proportion of RNs that come from racial/ethnic minority backgrounds, some caution needs to be exercised as one evaluates these data. While most all of the key estimates from the study have relatively small sampling errors, the sampling approach has a direct impact on the variances for the data on the racial/ethnic background of the nurses (See Appendix B and particularly Appendix B Table B-2). Therefore, true statistical

significance may not be able to be shown for much of the summary data on nurses according to their racial/ethnic background. An examination of the data suggests that the growth in the number of RNs who come from racial/ethnic minority backgrounds has probably kept pace with the growth in the total number of nurses. However, it would appear that no significant increases in minorities has taken place.

Age Distribution

The average age of RNs has increased continually in the span of time covered by these sample surveys, rising from an average of 40.3 in November 1980 to 43.1 in March 1992. In November 1984, the average age was 40.9 and, in March 1988, it was 41.7. Only 11 percent of the RNs were under the age of 30 in March 1992 (see Appendix A, Table 1). In November 1980, about a quarter of the RNs were less than 30 years old. In March 1988, a little over 15 percent of the nurses were in this younger age bracket. Despite the growth in the overall number of RNs, the number of those below 30 has declined, from about 418,000 in 1980 to about 246,000 in 1992.

A number of factors could contribute to this rising age level among nurses. The characteristics of the new entrants into nursing are particularly relevant to an identification of these factors.

Pre-Registered Nurse Background

Twenty-nine percent of the RNs in March 1992 had worked in a health care occupation immediately prior to attending a basic nursing education program (See Appendix A, Table 2). The majority of these 645,582 nurses had worked as nursing aides (62.6 percent). Another relatively large group, 28.9 percent, were in licensed practical/vocational nurse positions before going into a basic nursing education program to prepare to become an RN.

Nurses who were health occupation workers just before entering education to become an RN tended to go to an associate degree program for their basic nursing education which prepared them to become a registered nurse. This was particularly true of those who had worked as licensed practical/vocational nurses. Eighty-one percent of those who had worked in those positions immediately prior to their basic nursing education program had attended associate degree programs for their education to become an RN.

All told there were 218,877 registered nurses in March 1992, about 10 percent of all the 2,239,816 RNs, who had been licensed practical/vocational nurses at sometime prior to becoming registered nurses (Appendix A, Table 3). Licensed practical nurses were more likely to be found among those who became RNs more recently than in the past. About 22 percent of those who had graduated from their basic nursing education program in the five

years prior to this study had been licensed practical nurses.

About 8 percent, or 189,049 of the 2,239,816 RNs, had post-high school academic degrees before entering their basic nursing education programs that prepared them to become RNs (See Appendix A, Table 4). (A total of 23,395 of these had also been licensed practical nurses.) Here, too, these types of individuals were somewhat more likely to be found among the more recent RN graduates. Before attending a nursing educational program, these RNs primarily had either associate degrees or baccalaureates. However, 5 percent of them had a master's degree. The largest single group of those who had academic degrees prior to their nursing education had been liberal arts majors, 27 percent. An almost equal number to these had majored in health-related fields.

Those with post-high school academic degrees were less likely than those who had been licensed practical nurses to get their basic nursing education in an associate degree program. About 52 percent of these RNs received their basic nursing education in an associate degree program, 34 percent in a baccalaureate program, and 15 percent in a diploma program.

Age at Graduation from Basic Nursing Education Program

The age at which individuals are entering into nursing practice has been increasing. The average age at graduation from a basic nursing education program for those who had graduated in the five years before the study date was 29.8 years compared to the average age for those who had graduated over 15 years before of 22.7 years (See Appendix A, table 5).

The increasing age level of the graduates from basic nursing education programs is due in part to the shift in the distribution of the types of educational programs from which the nurses graduate. Increased proportions of the graduates are from associate degree programs in the later years. Associate degree graduates tend to be older, on the average, than their counterparts in the diploma or baccalaureate programs.

In addition, the average age at graduation has increased for each type of RN entry program. Associate degree graduates averaged 32.1 years in the immediate 5-year period and 26.3 years among those who graduated more than 15 years ago. For diploma graduates, the averages for the respective periods were 27.3 years and 21.7 years. For baccalaureate graduates, they were 26.1 years and 22.9 years, respectively.

Those nurses who had prior academic degrees or who were licensed practical nurses generally showed the same increasing graduation age trends as did all the nurses. However, in each instance they were older on the average than their counterparts who did not have these prior educational experiences. Therefore, if the proportion

of new entrants into the RN population with prior post-high school degrees continues to increase, it can be anticipated that the average age at which individuals will become registered nurses will continue to rise.

Despite the increasing age level of registered nurses there has been an increase in the proportion of the nurses who were employed in nursing. In more recent years, nurses at most age levels were more likely to be employed in nursing than in the past. This may be due, in part, to changes in the effects of family status on the propensity of nurses to work.

Family Status

Almost 72 percent of all the registered nurses were married; 16.5 percent were widowed, divorced or separated, and 11 percent were never married (See Appendix A, Table 6). About 55 percent had children living at home and 21 percent of all the nurses had children under the age of 6. In each instance, whether married or not and with children or not, the overwhelming majority were employed in nursing. It would appear that the nurses in the March 1992 study were more likely to be employed in nursing regardless of family status than were those in earlier studies. For example, about 26 percent of those who were married and had children under the age of 6 in the November 1980 study were not employed in nursing. In this study, only 14 percent of those in that marital status category were not employed in nursing.

Family status does have some impact on whether the nurses would be working full or part-time. About 26 percent of all registered nurses were employed on a part-time basis. Married nurses with children, particularly those with children under the age of 6, were more likely than other nurses to be employed on a part-time basis. About 44 percent of those who were married and had children under the age of 6 were working on a part-time basis.

The total income available to a nurse's household may be an influencing factor on the degree to which a nurse might choose to be employed. The nurses were asked to estimate income for 1992, including their earnings and their spouse's earnings if married, and all other income including alimony, child support, dividends, royalties, interest, social security, and retirement. Based on the data in Appendix A, Table 7 it is estimated that the median family income for 1992 of the total registered nurse population was \$52,444.

For married nurses, the estimated median family income for the year was \$61,743. If the married nurses were employed on a full-time basis, it was \$64,203. If they were working part-time, it was \$59,436 and if they were not working, it was \$54,073.

Basic Nursing Educational Preparation

One of the most dramatic changes in the characteristics of registered nurses is that of the type of initial nursing educational preparation. When the first of these sample surveys was conducted, in September 1977, three-quarters of the nurses had received this initial preparation in a diploma program. In March 1992, 42 percent had entered nursing through diploma programs. Despite the increase in the number of nurses between 1988 and 1992, the number of those who initially attended a diploma program decreased, from 989,941 in 1988 to 951,101 in 1992 (See Appendix A table 8).

The number initially graduating from an associate degree program showed the largest growth, from 158,530 in 1977 to 729,050 in 1992. In 1977, associate degree graduates represented only 11 percent of the registered nurse population at that time. In 1992, they were about one-third of the registered nurses. Among those who graduated from their basic nursing educational programs within the five years immediately prior to this study, 59 percent were associate degree graduates.

The number of graduates from baccalaureate basic nursing educational programs also showed substantial growth, from 191,494 in 1977 to 557,654 in 1992. However, in 1977 there were more baccalaureate graduates than associate degree graduates. In 1992, the associate degree graduates exceeded the baccalaureate graduates. Furthermore, as can be seen on Table 5 in Appendix A, in the more recent years, the proportion of the new entrants into nursing that come from baccalaureate programs has declined. Among those who graduated within the most immediate 5-year period, 31 percent were baccalaureate graduates. Among those who graduated in the 5-year period preceding that one, 34 percent were baccalaureate graduates.

Highest Nursing Educational Preparation

About 21 percent of the 1992 registered nurse population had completed additional academic preparation since they graduated from their basic nursing education. When all these educational experiences are taken into account, both the initial education preparing for RN licensure and any that was taken subsequent to licensure, about a third of the nurses, 754,848 out of the 2,239,816, had a diploma as their highest educational preparation in 1992 (Appendix A, Table 8). Twenty-eight percent, or 632,483, had an associate degree. Thirty percent, or 671,399, had baccalaureates, while 168,010, 7.5 percent of the total, had

^{&#}x27;Included in these figures are some relatively small proportions of individuals who had graduated from master's or doctoral programs.

master's degrees. About 11,300 were estimated to have doctoral degrees.

It should be noted that not all the degrees came from programs granting nursing degrees. A number of the nurses have degrees which are not in nursing but are related to their nursing careers. This was more likely to be found among master's and doctoral degree graduates. About 29 percent of the nurses with master's degrees and 62 percent of the nurses with doctoral degrees had degrees in a related field.

The primary focus of the degree for about 43 percent of the nurses who had post-basic nursing education master's degrees in nursing or in a nursing-related field was clinical practice (See Appendix A, table 9). Twenty-four percent had majored in supervision/administration and 22 percent in education.

Doctoral degrees were mainly focused on either education or research. The primary focus of the post-basic nursing education doctoral degrees for 37 percent of the nurses with such degrees was education. For 33.5 percent, it was research. Clinical practice and supervision/administration was the focus of the doctorates for far less nurses.

About 8 percent, 190,013 out of the 2,239,816 RN population, were enrolled in a formal education program leading to a nursing or nursing-related degree in March 1992. This is both a numeric and relative decrease since the March 1988 study when about 194,000 nurses, 9.5 percent of the total, were participating in post-RN academic degree programs. Earlier studies also showed about the same proportion of attendees among the nurse population at the time as in the 1988 study.

Those enrolled in academic programs in March 1992 exhibited many of the same characteristics as those in the earlier studies. They were most likely to be part-time students and most likely to employed in nursing on a full-time basis (See Appendix A, Table 10). The majority of them were enrolled in programs leading to a baccalaureate degree. Sixty-one percent of the attendees in 1992 were in baccalaureate programs; 34 percent were in programs leading to a master's degree and 4 percent in doctoral programs (See Appendix A, Table 11). In 1988, the distribution was somewhat different. The number of enrollees in baccalaureate programs, and the proportion they were of total enrollees, were both higher in 1988 than in the 1992 study.

Those attending school relied on multiple resources to pay tuition and fees. The two prime sources were personal resources and employer reimbursement plans. Seventy-two percent of the students were estimated to use personal resources such as earnings, savings and/or family assistance for some assistance. About 56 percent obtained assistance from employer reimbursement plans. Federal

sources of support in the form of traineeships, scholarships, or grants were a resource for about 5 percent and Federally-assisted loans for about 3 percent. However, this resource was more important for master's and doctoral degree students than for baccalaureate students. About 13 percent of the master's degree students and 23 percent of the doctoral degree students obtained such support compared to 4 percent of the baccalaureate degree students (See Appendix A, Table 11).

Advanced Practice Nurses

Increased interest in expanding the availability of health care has led to particular emphasis on advanced practice nurses. The category of advanced practice nurses includes clinical nurse specialists, nurse anesthetists, nurse-midwives, and nurse practitioners. While some data on these types of nurses were obtained in the prior studies in this series, the collection of information on this subject was expanded in the March 1992 study.

After reviewing the data provided by the respondents it was clear that some misinterpretation of the questions might have occurred particularly since the data collection instrument does not contain any definitions of the terms. Therefore, a special analysis was made of these data which took advantage of a combination of the responses to a number of the areas of inquiry to determine those most likely to be appropriately classified within this category. Also, since a portion of the sample respondents indicated that they belonged to more than one of the groups of advanced practice nurses, responses to a number of the questions were examined to determine to which of the four groups of advanced practice nurses they should be assigned. Table 12 in Appendix A presents the results of this analysis.

Clinical Nurse Specialists

The largest of the four groups of advanced practice nurses was the clinical nurse specialists. Clinical nurse specialists were defined as those who had formal preparation beyond basic nursing education resulting in a master's degree. It was estimated that there were 58,185 such nurses in March 1992, 86.5 percent of whom were employed in nursing. However, a relatively small number of these nurses, 11,541 out of the 50,352 who were employed in nursing, worked in their principal nursing position with the job title of clinical nurse specialist. Formal preparation as a clinical nurse specialist appeared to provide good background for nursing educators. Forty-one percent, or 15,965 of the 38,812 who did not have the clinical nurse specialist position title, were engaged in nursing education, primarily in schools of nursing but also in in-service education positions.

Only 7,877 of these nurses with formal preparation as clinical nurse specialists were certified by a national organization as

such. Although high proportions of both the certified and the noncertified nurses were employed in nursing, the certified nurses were more likely to be employed than the noncertified ones. They were also far more likely to have a position title of clinical nurse specialist than were the noncertified nurses.

Nurse Practitioners

The second largest group of advanced practice nurses was the nurse practitioners. Included within this group were all those with formal preparation beyond basic nursing education as a nurse practitioner if such preparation was at least three months in duration. Given the evolving nature of the role and the education of these advanced practice nurses in the 25 to 30 years during which this nursing role has developed, it was felt that the study did not have sufficient information to refine the data further. The educational program attended by about two-thirds of the nurses included within the definition resulted in a certificate. For onethird, it resulted in a master's degree. Based on the definition, there were an estimated 48,237 nurses who had formal preparation as a nurse practitioner, 88.4 percent of whom were employed in nursing. Included among these nurses were about 2,000 whose formal preparation was that of both clinical nurse specialist and nurse Among the 42,624 who were employed in nursing, 49 practitioner. percent, or 20,733 had the position title of nurse practitioner.

About 58 percent, or 27,903 of the 48,237 nurses with formal preparation as nurse practitioners were certified by a national organization as such. As was true for the clinical nurse specialists, those who were certified were more likely to be employed in nursing than those who were not certified. Only 79 percent of the noncertified nurses were employed in nursing compared to 95 percent of the certified nurses. Here too, certified nurses were far more likely to have the position title of nurse practitioner than noncertified nurses. A total of 16,477 of the 20,733 with that position title were nationally certified.

Nurse Anesthetists

The third largest group of advanced practice nurses was the nurse anesthetists. Included as a nurse anesthetist were all those with formal preparation beyond basic nursing education of at least three months in length in which the specialty of anesthesia was studied. Using this definition there were 25,238 nurses among the advanced practice nurses who were nurse anesthetists, 86.3 percent of whom were employed in nursing. Most of those who were employed in nursing, 18,125 out of the 21,776 employed nurses, were in positions where the job title was that of nurse anesthetist. Most, particularly those who were employed in nursing, had national certification. Practically all those with the position title of nurse anesthetist were nationally certified. Among those who were not certified, only 58 percent were employed in nursing, in

contrast to 93 percent of the certified nurses.

Nurse-Midwives

There are far fewer nurse-midwives than there are members of the other three groups of nurses among the advanced practice nurses. To identify those who were most likely to fit the definition of nurse-midwife several screening steps were taken. The formal preparation beyond basic nursing preparation had to be at least 9 months in length. Also, a relatively large proportion of those in the sample who indicated they had formal preparation as nursemidwives were initially foreign-educated. Such nurses usually need to take additional education here before they can qualify for certification. Therefore, in addition to the screen for the length of the educational program, those who were foreign-educated had to be nationally certified as a nurse-midwife in order to fit the definition. Based on this definition, there were an estimated 7,405 nurses with formal preparation beyond basic nursing education as nurse-midwives, 86 percent of whom were employed in nursing. Two-thirds of the 7,405, or 5,011, had national certification as nurse-midwives. As might be expected since the position title included on the survey form was that of "certified nurse-midwife", all 2,562 with the position title were nationally certified.

An examination of these data in connection with that which appears in the succeeding section of the report on employed registered nurses suggests that there are a number of nurses with position titles equivalent to that of these advanced practice nurses but without the formal preparation as indicated here (See Appendix A, Table 21). This is particularly seen in the case of the clinical nurse specialists where, according to the data on all employed nurses, regardless of whether they are advanced practice nurses, an estimated 35,524 had the position title of clinical nurse specialist compared to 11,541 among those defined as clinical nurse specialists here. An in-depth review of the functions and responsibilities of the nurse supply which might help to clarify some of the disparities in the data is beyond the scope of this study. However, these data do point to the need for some specialized data and analyses on advanced practice nurses.

B. Employed Registered Nurses

As indicated earlier, the total number of registered nurses employed in the United States in March 1992 was 1,853,024, 82.7 percent of the 2,239,816 in the registered nurse population. The number of employed registered nurses in the country has increased over the years as has the proportion of the nurse population who were employed in nursing. In November 1980, 76.6 percent of those in the nurse population at that time were employed in nursing and, in March 1988, 80 percent were employed in nursing.

Distribution Within Employment Settings

While registered nurses can be found in all parts of the health care system the predominant employment setting is that of the hospital. In March 1992, 66.5 percent of the employed nurses, 1,232,717 of the 1,853,024, worked in hospitals. Fifteen percent, or 250,004 RNs, worked in community/public health settings, including State or local health departments, non-hospital based home health agencies, various types of community health centers, student health services, and occupational health services. About 8 percent, or 144,110 RNs, were in ambulatory care settings, including physician-based practices, nurse-based practices, and health maintenance organizations. A total of 128,983 nurses, 7 percent of all those employed in nursing, worked in nursing homes or other extended care facilities. The remaining group of those employed in nursing were working in such settings as nursing education, Federal administrative agencies, State boards of nursing, nursing or other health associations, health planning agencies, prisons or jails, insurance companies (See Appendix A, Table 13).

The proportion of the total employed nurse supply who were in hospitals declined somewhat in March 1992 from the proportion in prior studies. However, the number of those who were in the hospital setting has continually increased. In 1988, the number of those in the hospital setting was estimated at 1,104,978, over 100,000 less than the 1,232,717 in 1992.²

Over 9 out of every 10 nurses in hospitals spend some portion of their time providing direct patient care services. An examination of the type of units in which they worked provides some indication of the shifting focus of RN work settings. In both 1988 and 1992, nurses providing care in in-patient bed units were by far the However, the number of these majority of hospital nurses. increased only 5.5 percent compared to an overall increase for all hospital nurses of 11.6 percent. Although still a relatively small proportion of the nurses in hospitals, those in outpatient departments increased 68 percent, from 36,904 in 1988 to 61,875 in 1992 (See Appendix A, Table 14). As might be expected, nurses predominantly worked in the in-patient bed units or in the outpatient departments with general medical/surgical patients. However, 17 percent of the nurses in 1992 worked in coronary care units. Newborn units and psychiatric units, each with 7.5 percent of the nurses, were next in importance (See Appendix A Table 15).

In 1988, private duty was considered a separate employment setting or field of nursing but in the 1992 study it was not. However, even if the 19,988 nurses estimated as in private duty nursing in 1988 were to be considered as working in hospitals at that time, the difference between the numbers working in hospitals in 1988 and 1992 would still be about 100,000.

Nurses in community/public health nursing showed a 38 percent increase between 1988 and 1992. Among these, however, the largest increase, by far, was noted for those working in non-hospital-based home health care such as visiting nursing services or other home health agencies. An estimated 93,271 nurses were in such settings Nurses in hospital-based home health care settings totalled 4,861. Thus, in total, 98,132 RNs were in home health care. Most of the other areas under community/public health either showed more modest increases or remained about the same. A few exhibited some decrease in the numbers of nurses. Most notable among these was the occupational health employment setting. Since November 1980 when the number of nurses in that employment setting totalled 29,162, the number has continually decreased. In 1992, the estimated total in that setting was 19,266.

The growth in the number of nurses in ambulatory care settings between 1988 and 1992 generally kept pace with the growth in the overall number of employed nurses. The increase in the number of nurses in nursing homes and other extended care facilities, from 107,805 in 1988 to 128,983 in 1992, reversed the trend noted for the 1984-1988 period. In 1984, there were 115,077 such nurses. Similarly, those working in nursing education settings increased between 1988 and 1992 while they had shown a decrease in the 1984-1988 period.

Characteristics within Employment Settings

About 31 percent, or 577,077 of the 1,853,024 employed RNs, were working on a part-time basis. The proportion working on a part-time basis varied according to the field of employment. The highest proportion of part-timers was found among those working in ambulatory care settings, about 39 percent. The lowest among those in occupational health or student health services, about 24 percent (See Appendix A, Table 16).

The average scheduled work hours per year for all full-time nurses was 2,004, including paid vacations, holidays, etc. For part-timers, it was 1,110. The average scheduled hours in most all the fields of nursing tended to be lower, on an overall basis, than they were in 1988. However, in comparison to 1988, the average hours in 1992 were always lower for full-time nurses but generally higher in most fields for part-time workers (Appendix A, Table 16).

An examination of the differences between the number of scheduled hours per week and the actual number of hours worked showed that, for the week of March 23, 1992, nurses tended to work longer hours than their schedules called for in all the fields of nursing. Full-time nurses averaged 41.7 actual hours that week in contrast to average scheduled hours of 39.5. Part-timers averaged 24.5 actual hours worked compared to average scheduled hours of 22.9 (See Appendix A, Table 17).

As shown in previous surveys as well, younger nurses were more likely to be employed in hospitals than older ones. The average age of the hospital nurses in March 1992 was 39.2 years, almost two years less than the 41 year average for all employed nurses. Eighty-four percent of all the employed nurses under 30 were working in the hospital employment setting. In contrast, only half the nurses who were 50 years old or over worked in hospitals (See Appendix A, Table 18). Nurses in occupational health, student health services, and nursing homes or other extended care facilities had the highest average ages, 47.8, 47.5, and 47 years, respectively.

Seventy-three percent of all employed nurses whose highest educational preparation was an associate degree and 69 percent of those whose highest preparation was a baccalaureate worked in hospitals. Nursing homes drew 77 percent of their nurses from among those whose highest preparation was that of a diploma or associate degree. They were less likely than other patient care service settings to have baccalaureate, master's or doctorally-prepared nurses. As could be anticipated, 72.5 percent of those in nursing education had as their highest preparation a master's or doctoral degree (See Appendix A, Table 19).

Employment Basis

Most nurses were employees of the facility in which they worked. About 2 percent worked in their principal nursing position through a temporary employment service and another 2 percent were self-employed (Appendix A, Table 20).

The data on the number of nurses who worked through temporary employment services is of particular interest as one looks back at prior studies. The 1988 study showed a marked increase over the prior studies in the number of nurses working through temporary employment services. This 1992 study shows a reversal of that trend. In 1988, it was estimated that 50,678 nurses were employed in their principal nursing position through temporary employment services. In 1992, there were 35,506. There were considerably more nurses in 1992 than in 1988 who, while employed through other means in their principal positions, had additional positions for which they received work through a temporary employment service. However, those individuals brought the total nurses who received work through temporary employment services in 1992 to 84,414, about 4,000 less than the 88,444 in 1988.

Position Levels

About two-thirds of all employed nurses in 1992, similar to the data from prior studies, were in staff-level positions. As was the case in the prior studies, this study also shows that positions such as head nurse or supervisor are a declining proportion of the nursing positions. In 1988, there were 177,449 nurses in such

positions, 10.9 percent of the 1.627 million employed nurses at that time. In 1992, there were 176,806 nurses in those positions, 9.5 percent of the 1.853 million employed nurses (See Appendix A, Tables 21 and 22).

Over three-quarters of the employed nurses whose highest nursing education preparation was that of an associate degree were employed in staff-level positions. The nurses whose highest educational preparation was a diploma or baccalaureate were also mainly in staff-level positions, 69 and 66 percent, respectively. Those with master's degrees were approximately equally divided among advanced practice, administrative, and teaching positions (See Appendix A, Table 23).

Functions during Usual Workweek

Sixty-nine percent of the employed nurses in 1992 spent at least 50 percent of their usual workweek in direct patient care activities. The majority of the nurses (52 percent) spent at least 75 percent of their time in such activities (See Appendix A, Table 24). While these data generally affirm the findings of the prior studies, they do suggest some change. From the 1977 study to the 1988 one, the proportion of nurses who spent at least half their time in direct patient care activities tended to increase. The 1992 study, however, showed a slight decrease in the percent of nurses who spent half their their time in direct patient care from 1988 when the proportion was 71 percent.

As could be anticipated from the position levels of nurses with associate degrees, they averaged about 69 percent of their usual workweek in direct patient care activities (See Appendix A, Table Similarly, in line with their position levels, diploma and baccalaureate nurses also spent a considerable amount of their workweeks in direct patient care activities. Master's and doctorally-prepared nurses, as well, exhibited functional patterns fairly suggestive of their position level distribution. Master's degree nurses averaged about a third of their time in direct patient care, 26 percent of their time in administration, and 19 percent in teaching. Nurses with doctorates averaged about 35 percent of their time in teaching and 31 percent in administration. Doctorally-prepared nurses were the only group to spend significant time in research. In 1992, they averaged about 13 percent of their usual workweek in research, somewhat lower than the 16 percent shown in the 1988 study.

Annual Earnings

In March 1992, the average annual earnings of full-time employed registered nurses in their principal nursing positions was \$37,738 (See Appendix A, Table 26); an increase of 33 percent over the \$28,383 in March 1988. Among the various employment settings,

nurses in hospital employment had the highest average earnings, \$39,253. Those in student health services the lowest, \$28,316.

Certified registered nurse anesthetist had the highest average earnings among the nurses in all the different employment settings and position levels, \$76,053. This was considerably higher than the average of \$47,717 found for these nurses in the 1988 study. However, given the large variation in earnings of nurse anesthetists found in each of the studies, it is difficult to ascertain the real change in earning levels for these nurses.

The average annual earnings of the nurses varied according to Those whose highest educational educational preparation. preparation was that of an associate degree averaged \$35,258 while the doctorally-prepared nurses averaged \$50,646 (See Appendix A, Both nursing earnings and the distribution of the Table 27). educational preparation of nurses vary according to employment setting and position level. These factors need to be considered in determining the effect of educational preparation on earnings levels. An examination of staff nurse earnings showed that the average earnings of those whose highest education was an associate degree was \$733 less than that of the nurse whose highest education was a diploma, \$34,072 and \$34,805, respectively. Nurses with baccalaureates who were in staff nurse positions averaged \$36,552 Nurses with and the relatively small number of master's degree nurses in such positions averaged \$41,610.

About 16 percent of all the employed nurses held other paid nursing positions in addition to their principal nursing position. As would be expected the average annual earnings of these nurses were higher than those of the nurses with only one nursing position. For all nurses, regardless if they had one or more than one position and if they worked full- or part-time in their principal position, the average annual earnings from nursing were \$33,898. If they had more than one nursing position the average earnings were \$39,674. Those with one position averaged \$32,821 (See Appendix A, Table 28).

C. Registered Nurses Not Employed in Nursing

In March 1992, 386,791 individuals with current licenses to practice as registered nurses, 17.3 percent of the 2,239,816 nurses, were not employed in nursing. Twenty-six percent of the 386,791 registered nurses were working in non-nursing positions (including some who were actively seeking nursing employment). About 7 percent of those not employed in nursing were actively seeking nursing employment. Fifty-one percent of all those who were not employed in nursing had not worked in nursing for at least five years and 1.2 percent had never worked as nurses (See Appendix A, Table 29).

Nurses Seeking Nursing Employment

The 28,603 registered nurses who were not employed in nursing in March 1992 but were actively seeking nursing employment represented 1.3 percent of the 2.239 million registered nurses in the country. This rate was the lowest found among the five studies in this series.

Those who were actively seeking nursing employment were more likely to have been employed in nursing more recently than other nurses who were not working in nursing. Sixty-seven percent of the job seekers had been employed in nursing less than five years prior to the study with the majority of these having been employed less than a year before. In contrast, only 43 percent of the nurses who were not employed, and not seeking employment, had been in nursing positions less than 5 years prior to the study, and the vast majority of these had not been employed as nurses for at least a year.

The majority of the RNs who were looking for nursing employment were looking for part-time positions. The majority had been searching for employment for less than 4 weeks prior to the study. Twenty-three percent had been looking for less than a week (See Appendix A, Table 30).

Nurses Employed in Non-Nursing Occupations

The 99,955 registered nurses who were employed in non-nursing occupations in March 1992 represented a decrease from the 114,064 such nurses in March 1988. Included among the 99,955 were 6,034 who were also seeking nursing employment. Those who were employed in non-nursing occupations and were not looking for nursing positions were 4.2 percent of the 2.239 million registered nurse population.

Similar to the data found in the March 1988 study, while the majority of those employed in non-nursing positions were in non health-related occupations, 44 percent were in health-related jobs. Sixty-four percent of the nurses in non-nursing work were full-time workers. However, the nurses in health-related occupations were much more likely than those in non health-related occupations to be full-time workers (See Appendix A, Table 31).

The predominant reasons for these nurses to be in non-nursing positions were that the hours were more convenient in this position and that the position was more rewarding professionally. The third ranking reason was the salaries were better in these positions. About 23 percent were concerned about their nursing skills being out-of-date and 18 percent were concerned about safety in the health-care environment (See Appendix A, Table 32).

Inactive Registered Nurses

The largest segment of the nurses who were not employed in nursing were neither looking for nursing positions or employed in a non-nursing occupation. The 264,267 such nurses were 12 percent of the 2,239,816 registered nurse population. Both the number and the proportion these registered nurses are of the total RN population have decreased since the prior studies in this series.

For the most part these inactive nurses came from the older segments of the nurse population. Half of them were at least 60 years old. Less than 20 percent were under the age of 40. Seventy-one percent of these younger nurses were married with preschool age children at home. An additional 14 percent of them were married with older age children (See Appendix A, Table 33).

D. Geographic and Employment Mobility

The survey instrument provided for the exploration of a number of changes that the nurses might experience during the course of their careers in nursing. Among these were geographic relocations, movement in or out of work status and changes in the type of employment setting.

Location of Basic Nursing Education

Thirty-six percent of those with current licenses to practice in March 1992 had received their basic nursing education in a foreign country or in a State different from the State in which they were located at the time of the survey. About 3 percent, or 74,151 out of the 2,239,816 registered nurses, received their basic nursing education in a foreign country. As would be expected, the longer the time between graduation from the basic nursing education program and March 1992, the more likely it was that the nurse was in a different location. Forty-four percent of the nurses who had graduated at least 15 years before were in a different location compared to 19 percent of those who had graduated less than 5 years before.

There were noticeable differences, however, among the graduates from the different types of basic nursing educational programs. Associate degree graduates, no matter how long they were out of school, were least likely to be located in a different State from the State in which their basic nursing education was received. Baccalaureate graduates were most likely to be in a different location (See Appendix A, Table 34).

Residence in March 1991 and 1992

Most of the nurses with current licenses to practice in March 1992 were residents of the same State as they were in March 1991. Only

3 percent had changed their residential State between 1991 and 1992. This is less than the 4.7 percent who had done so between March 1987 and 1988. However, as was true in the past studies, younger nurses in the 1992 study were far more likely than older ones to have moved their State of residence. Six percent of the nurses who were under the age of 35 in 1992 had changed their resident State compared to 2 percent of those 35 years old or over (See Appendix A, Table 35).

Employment Status in March 1991 and 1992

About 3 percent, or 72,689 of the 2,239,816 registered nurses, had received their first license to practice as a registered nurse in 1991. As would be expected, a little over half of these nurses were not employed in nursing in March 1991 but, for the most part, were employed in March 1992.

On an overall basis, taking into account all the nurses located in this country and licensed to practice as of March 1992, most had the same employment status in March 1991 and March 1992. Only 12.5 percent of them had shifted their employment status (See Appendix A, Table 36). Those who were employed on a full-time basis in March 1991 were most likely to be so employed in March 1992. Only 7 percent of these nurses had shifted their employment status between 1991 and 1992. Among those who were not employed in nursing in March 1991, about 21 percent were employed in March 1992. However, if you exclude those who were newly licensed in 1991, only 14 percent of those not employed in 1991 had become employed in 1992.

Nurses who were working in hospitals in 1992 were most likely to have also worked in a hospital in 1991. The nurses were less likely to be employed in the same type of setting if that setting was not a hospital. Nevertheless, the vast majority of the nurses in the other settings, as well, had been employed in the same type of employment setting in each of those years (See Appendix A, Table 37).

E. Geographic Distribution of the Registered Nurse Population

In line with the previous studies in this series, the New England area of the country had the highest concentration of employed nurses in relation to the population of the area. Typically, the West South Central area had the lowest concentration. Although the gap between those two areas has closed some since the 1988 study, the number of nurses per 100,000 people in the West South Central area is only 54 percent of the number in New England. Thus, the nursing resources as well as the personal and professional characteristics of the nurse population vary across the country.

State-by-State Distribution

The registered nurse population in each State varied from about 3,500 in Wyoming to almost 208,000 in California. Seven States had nurse populations of over 100,000 while 10 States had less than 10,000 nurses in their State (See Appendix A, Table 38). majority of the States increased their nurse populations between March 1988 and 1992. In general, the southern part of the country experienced greater gains than did other areas. New England, on the other hand, showed a loss in nurse population between 1988 and Only 2 States in that area, Connecticut and Vermont, increased their nurse population. The number of nurses in the other 4 States in the area were about the same or had decreased between 1988 and 1992. The largest loss of nurses occurred in Massachusetts which had an 11 percent decrease in its nurse population. Other States in the country where the nurse population remained about the same or decreased between the two years were Alaska, North Dakota and West Virginia.

Most of the States showed increases in the proportion of their RN population who were employed in nursing. Three States, Indiana, South Dakota and Wyoming, had a decrease in the proportion of the nurses located in the State who were employed in nursing. However, all three States had sizeable increases in their nurse populations. Therefore, they all experienced increases in their active nurse supply. Only Massachusetts and West Virginia showed a decline in their active nurse supply between 1988 and 1992.

As was the case in prior years, however, wide variation was found from State to State in the proportion of nurses who were employed in nursing. These rates ranged from a low of 75 percent in Connecticut to 94 percent in North Dakota and 96 percent in the District of Columbia. The proportion of the employed nurses who worked on a part-time basis also varied considerably from State to State. The New England area had the highest part-time rate in the country. Of particular interest here is that Connecticut not only had the lowest activity rate in the country but also 41 percent of its active nurse supply was employed on a part-time basis. In comparison, the overall part-time rate for the country was 31 percent. Nurses in the southern part of the country were least likely to be working on a part-time basis (See Appendix A, Table 39).

Metropolitan Areas

In March 1992, 83.4 percent of the RNs were located in metropolitan areas. This a a somewhat higher proportion than in the earlier studies in the series where about 82 percent of the registered nurse population was estimated to be located in metropolitan areas. RNs who were located in metropolitan areas were more likely to be employed in nursing than those in nonmetropolitan areas, 83.2 percent and 80.1 percent, respectively. Therefore, about 84 percent of the 1,853,024 employed nurses were working in

metropolitan areas in the country.

As would be expected given the distribution of metropolitan areas in the country, the proportion of the registered nurses who were located in metropolitan areas varied from region to region. The highest proportions were found in the Middle Atlantic and Pacific areas and the lowest in the West North Central (See Appendix A, Table 40).

Characteristics of RNs in Geographic Areas

New England and the West North Central areas of the country were least likely to have nurses with racial/ethnic minority backgrounds among their nurse populations. The Pacific area had the highest proportion of minorites in its population, 16 percent compared to about 3 percent in the other two areas. The predominant minority nurses in the Pacific area were those with Asian/Pacific Island background, 9.5 percent of the nurse population. In addition to the Pacific area, Asian/Pacific Island nurses were also more likely to be a part of the nurse population in the Middle Atlantic area than in other parts of the country. Black (nonHispanic) nurses were more prevalent among the nurse populations in the south and in the Middle Atlantic area than elsewhere. Hispanic nurses, although a relatively small part of any area's population, were more likely to be found among the nurses in the Pacific, Mountain and West South Central areas (See Appendix A, Table 41).

The East South Central area of the country was the only one of the nine regions where the majority of the nurses (53 percent) was less than 40 years old. In contrast, only 40 percent of the nurses in the Pacific area were under the age of 40. Generally, nurses in the eastern and western parts of the country were more likely to be older than those in the mid-section (See Appendix A, Table 42).

The northeast was least likely to have nurses whose highest educational preparation was that of an associate degree. The south and the west were most likely to have nurses with such preparation. The nurses in the western part of the country were more likely to have at least a baccalaureate degree than were the nurses in other areas. Those in the northeast were more likely to be at least master's-prepared than were those elsewhere in the country (See Appendix A, Table 43).

Employment Settings of Nurses in Geographic Areas

As expected, the predominant employment setting for the nurses in each area was the hospital. The proportion of the nurse supply in each area working in hospitals ranged from 61.9 percent in New England to 69.2 percent in the West South Central. The New England and the West North Central areas were more likely than the other areas to have higher proportions of their nurses employed in nursing homes or other extended care facilities. The East South

Central and South Atlantic areas had greater concentrations of their nurse supply employed in community/public health facilities than other areas. The Pacific area, followed by the East North Central and Mountain areas, was more likely to have a higher proportion of its nurse supply working in ambulatory care settings than other areas (See Appendix A, Table 44).

Average Salaries within Geographic Areas

The average annual salary of full-time employed nurses in stafflevel positions in each area was examined to get some indication of variations in salaries around the country. The average salary of these nurses ranged from \$31,510 in the West North Central area to \$41,315 in the Pacific area (see Appendix A, Table 45).

The average salaries of the nurses in the northeastern and the Pacific areas of the country increased about 38 percent between March 1988 and March 1992, the highest increase among all the areas. The Mountain area increase of about 28 percent was the lowest.

Appendix A

Tables

Table 1. Registered nurse population by sex, racial/ethnic background, and age group: March 1992

And the state of t		lotal		Employed	in nursing		Not emplo	Not employed in nursing	Sing
sex, racial/ethnic dickground and age group	in sample	Number Per	Percent	in sample	Number Peri	Percent	in sample	Number	estimated er Percent
Total	32,304	2,239,816	100.0	27,336	1,853,024	100.0	4,968	386,791	100.0
Sex									
Male	1,373	88,623		1,242	79,557	4.3	131	9,066	2.3
Female	30,908	2,149,398		26,080	1,772,395	95.6	4,828	377,004	97.5
Not known	23	1,794	0.1	7	1,073	0.1	6	721	0.2
Racial/ethnic background									
White (non-Hispanic)	29,598	2,018,456	90.1	24,916	1,655,704	89.4	4,682	362,752	93.8
Black (non-Hispanic)	1,074	119,09	4.0	973	80,568	4.3	101	10,042	2.6
Asian/Pacific Islander	884	75, 785	3.4	806	69,973	3,8	78	5,811	1.5
American Indian/Alaskan Native		866 6	9.0	145	8,162	9.0	32	1,835	0.5
Hispanic	381	30,441	1.4	345	27,470	1.5	36	2,971	0.8
Not known	190	14,526	9.0	151	11,147	9.0	36	3,379	6.0
Age group									
Less than 25	679	47,625	2.1	699	46,903	2.5	10	722	0.2
25-29	2,910	198,405	0.0	2,775	189,370	10.2	135	9,035	2.3
30-34	487.4	328, 190	14.7	4,359	296,556	16.0	425	31,635	8.2
35-39	6,258	421,553	18.8	5,653	376,592	20.3	909	44,961	11.6
55-05	5,245	355,799	15.9	4,747	319,071	17.2	865	36,728	9.9
69-57	3,814	259,093	11.6	3,366	225,541	12.2	877	33,552	8.7
50-54	2,893	202,111	0.6	2,439	167,164	0.6	454	34,947	0.0
55-59	2,258	164,273	7.3	1,738	121,562	9.9	520	42,711	11.0
59-09	1,662	120,687	5.4	986	66,733	3.6	919	53,954	13.9
65 and over	1,594	126,476	5.6	453	31,898	1.7	1,141	94,578	24.5
Mot known	202	15,603	0.7	151	11,634	0.6	56	3,970	1.0

Note: Estimated number and percent may not add to total because of rounding.

Table 2, Distribution of registered nurses who were employed in a health occupation before entering basic nursing education, by type of health occupation and basic nursing education: March 1992

health occupation	1	Total 1			Basic n	Basic nursing education	ation	Baccalaureate	reate
prior to taking	Number	Estimated	pated	Dip	Diptoma	Associat	e degree	and high	er degre
basic nursing education	in sample	Number	Percent	Number	Percent	Number Percent	Percent	Number Percent	Percent
Total	9,710	585,582	100.0	160,475	24.9	344,848	53.4	140,112	21.7
Nursing aide	6,086	403,890	100,0	131,023	32.4	162.236	2.03	110.550	27.6
Licensed practical/									
vocational nurse	2,809	186,834	100.0	19, 196	10.3	151,519	81.1	16,088	8.6
Managerial/clerical in						000	Mary Park		
health care setting	73	6,194	100.0	913	14.7	4.007	7.99	1 274	20.6
Allied health	586	37,790	100.0	7,825	20.7	21,071	55.8	8.858	23.4
Other	148	10,155	100.0	1,408	13.9	5,542	54.6	3,204	31.6
Not known	60	720	100.0	100	15.2	727	5 29	130	10 1

 $^{^{1/2}}$ includes an estimated 146 nurses whose basic nursing education was not known,

Table 3. Registered nurses who were licensed practical/vocational nurses before entering basic nursing education program, by type of basic nursing education: March 1992

RKs who were LP/VNs perior to taking	Number	Estimated total	d total 1/	Diploma	oma	Associa	Associate degree	ш.	saccalaureate and higher degrees
basic nursing education	in sample	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	3,285	218,877	100.0	24,333	100.0	172,606	100.0	21,907	100.0
Year of graduation from basic nursing education									
1987 or later	1,061	67,220	30.7	260'7	16.8	26,509	32,7	419'9	30.2
1087 - 1984	063	64, 103	29.3	5,681	23.3	51,562	6.62	6,860	31.3
1077 - 1081	685	45.687	20.9	4,823	19.8	35,593	20.6	5,271	24.1
1976 or earlier	549	41,211	18.9	9,625	39.6	28,563	16.5	3,023	13.8
Not known	7	959	0.3	107	5.0	378	0.5	139	9.0
Average age at graduation by year of graduation		7 72		5		77.		2	
1987 or later		32.8		32.5		33.0		31.4	
1977 - 1981		30.9		30.6		31.1		30.0	
total or perlian		30.0		26.6		31.6		0	

¹⁷ Includes 23,395 nurses who are also included on Table 4. Also includes an estimated 2,010 nurses whose basic nursing education was not known.

Table 4. Characteristics of registered nurses with post-high school academic degree before entering basic nursing education; by type of basic nursing education: March 1992

rurses with prior degrees	Number in sample	Estina Number	Estimated total	Diploma Number Per	Percent	Associa	Associate degree inber Percent	and higher der Number Per	and higher degrees Number Percent
Total	2,675	189,049	100.0	27,799	100.0	97,654	100.0	63,579	100.0
			RNS	RNs with prior degree	egree				
Degree obtained before basic nursing education									
Associate degree	1,150	83,616	27.77	11,094	39.9	47,996	49.1	24,526	38.6
Baccalaureate	1,368	04,970	50.2	15,095	54.3	44,152	45.2	35,707	56.2
Master's degree	134	9,208	6.4	1,388	5.0	4,812	6.4	3,008	4.7
Doctorate Not known	20 3	1,160	0.0	222	0.8	14	0.7	258	0,1
			major	field of study	- And				
Major field of study									
Biological/Physical science	607	27,884	14.7	3,214	11.6	11,031	11.3	13.621	21.4
Business/management	193	13,147	7.0	1,555	5.6	9,598	0.0	1,994	3.1
Education	340	24,349	12.9	4,953	17.8	14,242	14.6	5, 153	10
Liberal art	969	50,390	26.7	7.377	26.5	25,679	26.3	17,334	27.3
Social science	273	19,973	10.6	2,264	8.1	11,565	11.8	6,145	5.6
Health-related	149	45,783	24.2	7.677	27.6	21,497	22.0	16,608	26.1
Other	111	6,896	3.6	710	2.6	3,462	3.5	2,724	4.3
Not known	0-	628	0.3	25	0.2	581	9.0	:	;
Year of graduation from			RNS y	RNs year of graduation	hation				
basic nursing education									
1987 or later	702	48,216	25.55	3,541	12.7	30,014	30.7	14,662	23.1
1982 - 1986	908	57,878	30.6	6,951	25.0	32,397	33.2	18,530	1.62
1977 - 1981	634	43,362	22.9	5,951	21.4	21,541	22.1	15,870	25.0
1976 or earlier	526	38,950	20.6	11,357	6.05	13,346	13.7	14,247	22.4
Not known	7	644	0.3		1	355	5.0	270	5.0
			RNS ave	RNs average age at graduation	graduati	uo			
Average age at graduation by year of graduation									
1987 or later			11.11		32.3		1.47		31.2
1982 - 1986			31.6		30.5		10.1		200
1927 - 1981			20.1		28.8		102		28.0
					200				

Table 5. Year of graduation from basic mursing education and the average age at graduation for the registered nurse population, by type of basic nursing education: Narch 1992

Tear of graduation	Number in sample	Estimated total Number Perce	Percent	total Average age Percent at graduation	Number	Diploma ser Percent	Average age at graduation
Total	32,304	2,239,8161/	100.0	25.0	101,129	100.0	22.3
1987 or later	665"7	305,830	13.7	8.02	29,765	3.1	27.3
1982 - 1986	5,352	378,143	16.9	27.7	56,821	0.0	2.7
Farlier than 1076	14 548	1 171 448	50.5	20.0	781 154	80.5	25.7
	76	5,485	0.2	;	2,023	0.2	::
Tear of graduation		Associate degree Number Percent	degree	Average age at graduation	Baccalaureate Number Percen	Percent	Average age at graduation
Total		729,050	100.0	29.5	554,902	100.0	24.2
		181,486	24.9	32.1	850,29	17,0	26.1
1982 - 1986		193,128	26.5	30.1	127,366	23.0	54.9
1927 - 1981		165,533	22.7	28.1	133,524	24.1	24.1
1976 and earlier		187,889	25.8	26.3	198,724	35.8	22.9
Not known		1.014	0.1	;	1,190	0.2	,

" includes an estimated 2,581 rurses whose basic nursing education was in master's degree program, 171 in a doctoral program and 2,010 whose basic nursing education was not known.

Table 6. Registered nurse population, by marital status and employment status: Narch 1992

		Total		Employed in nursing		full-time	Employed in nursing part-time	nursing p	part-time	Not employed	ed in nursing	ing
Marital status	Number In sample	Estima	Percent	Rumber in sample	Estimated	Percent	Number in sample	Estimated Number P	Percent	Number in sample	Est inated Number	Percent
. Total	32,304	32,304 2,239,816	100.0	18,849	1,275,947	100.0	787.8	577,077	100.0	4,968	197,684	100.0
Married With children	23,197	1,600,446	71.5	12,353	329,912	65.0	7,191	488,997	24.7	3,653	281,536	72.8
under 6 only With children	3,349	232,556	10.4	1,433	96,223	7.5	1,534	106,958	18.5	382	726,95	7.6
6 and over only With children	8,870	610,745	27.3	5,259	356,506	27.9	2,625	179,452	31.1	986	74,786	19.3
both age groups No children	3,128	514,449	9.6	1,392	92,334	7.2	1,326	90,571	15.7	410	31,544	8,2
at home No information	7,802	538,913	24.1	4,241	282,521	22.1	1,694	111,237	19.3	1,867	145,155	37.5
on children	87	3,784	0.2	28	2,328	0.2	12	779	0.1	8	219	0.2
Widowed, divorced, separated With children	5,366	368,226	16.5	3,643	240,511	18.8	817	54,978	6.6	906	72,737	18.8
urder 6 only With children	180	11,129	0.5	137	8,771	2.0	35	1,933	0.3	8	527	0.1
6 and over only With children	2,038	140,195	6.3	1,620	110,025	9.6	652	17,758	3.1	159	12,412	3.2
both age groups No children	223	14,357	9.0	160	9,835	0.8	4.5	3,455	9.0	16	1,068	0.3
at home No information	2,912	201,638	0.0	1,720	111,473	8.7	7.1.7	31,727	5.5	718	58,438	15.1
an children	13	206	17	9	407	11	2	105	0.0	¥5	394	0.1
Never married	3,421	248,435	11.1	2,672	193, 134	5.1	215	28, 196	6.4	337	27,105	7.0
No information on marital status	320	22,708	1.0	181	12,390	1.0	29	206'9	6.0	7.5	5,412	1.4

1/ Less than 0.1 percent.
Note: Number and percent may not add up to total because of rounding.

Table 7. Distribution of registered nurses according to total family income expected in 1992, by marital status and employment status:

March 1992

family income	In sample	total nurses	Total	Employed in full-time	rursing Part-time	in nursing
Total	32,304	2,239,816	1,853,024	1,275,947	577,077	386,791
\$15,000 or less	688	49,863	14,684		12,	35,180
15,001 - 25,000	1,543	102,652	54,983		31,	699'25
25,001 - 35,000	4.279	271,760	224,476		8	47,284
35.001 - 50.000	8,129	541,815	484,438		127	57,378
50 001 - 75 000	8 923	626,830	\$67.559		180	59,271
75,001 - 100,000	3,909	288,828	256,326		7	32,503
100.001 - 150.000	1.594	118,972	93,801		3	25,172
More than 150,000	705	53.944	30,504	15,873	7	23,440
Not known	2,534	185,150	126,255	79,252	47,003	58,895
Married	23,197	1,600,446	1,318,909	829,912	488,997	281,536
\$15,000 or less		11,323	3,711		'n	7,612
15 001 + 25 000		42,950	18,705		13,	24,245
25 001 - 35 000		108,916	75,481		34.	33,435
35 003 - 50 000		314,854	267,979		107	46,875
50 001 - 75 000		549,850	699, 150		176,	669.05
75,001 - 100,000		276,670	245,959		70.	30,710
100.001 - 150.000		115,470	90,938		31,	24,532
More than 150,000	685	52,549	29,807	15,424	14,382	22,743
Not known		127,863	87,179		38.	40,685

Note: Estimated number may not add up to total because of rounding.

Table 8. Registered nurse population by basic and highest nursing-related education: March 1992

education	Number in sample	Tot Estin Number	al ated Percent	Number in sample	Diploma Estimated Number Perc	ona ated Percent	Number in sample	*	Associate degree Estimated umber Percent	Number In sample	Baccalaureat Estimated Number Perce	ureate ated Percent
Total	32,304	2,239,816	100.0	13,081	101,109	100.0	10,894	729,050	100.0	8,262	554,902	100.0
Diplona	10.434	754.848	13.7	10.434	754.848	70.4	:	;	:	:	:	:
Accordate desces	0170	187 617	28 2	102	2 885	0.0	0 117	A21 508	25.5	:	:	
Barral auroote in mirelan	00000	412 415	27.4	1 201	85 777	0 0	000	44 110	0	A OUT	140 252	0 08
Baccalaureate in related		21.0	200	2000	111100	244	27.5	000,000	330	200	303 000	96
field	774	58,984	2.6	522	41,901	4.4	218	17,065	2	4	;	:
aster's in nursing		119,636	10	64.5	33,814	19.0	218	14, 305	2.0	003	500.09	12.4
Master's in related field		48.374	2.2	283	22,541	2.4	113	6.810	0.0	263	18.878	3.6
Doctorate in nursing		4.241	0.2	14	0110	0.1	80	378	0.1	43	2 712	0.5
Doctorate in related field		7.043	0.3	45	2.424	0.3	60	563	0.1	09	4.056	0.7
Not known		1,792	0.1	:		:	1	:	:	:	;	:
Total employed in nursing	27,336	1,853,024	100.0	10,112	711,077	100.0	996'6	768'099	100.0	7,217	478,348	100.0
Diploma	7,993	557,585	30.1	7,993	557,585	78.4	:	:	*	:		1
Associate degree	8.644	574,099	31.0	87	7,387	1.0	8,557	566,712	85.7		;	1
Baccalaureate in nursing	7,955	528,894	28.5	982	68,639	6.7	920	61,211	9.3	6,052	398,988	83.4
Saccalaureate in related												
field	609	45,653	5.5	430	31,823	5.9	178	13,811	2.1			
Master's in nursing	1,450	100,138	5.4	366	26,856	3.8	201	12,953	2.0	857	58,547	12.2
Master's in related field		36,629	2,0	206	16,195	2.3	45	5,530	0.8	216	14,760	3.1
Doctorate in nursing	65	4,141	0.2	13	893	0.1	7	331	0.1	42	2,676	0.6
Doctorate in related field	16 P	5,421	0.3	35	1,699	0.2	9	346	0.1	20	3,377	0.7
Not known	6	465	21	:	:		:	:	:	:		
Total not employed in nursing	4,968	386, 791	100.0	2,969	240,024	100.0	928	68,156	17.6	1,045	76,554	100.0
Diploma	2,441	197,262	51.0	2,441	197,262	82.2	:	:	;	:	;	:
Associate degree	795	58,384	15.1	15	1,498	9.0	780	56,886	83.5	:	:	٠
Saccalaureate in nursing	1,144	83,521	21.6	221	17,138	7.1	72	5,120	7.5	851	61,264	80.0
field	165	13,332	3.6	125	10.078	4.2	07	3,254	4.8	:	:	•
Master's in nursing	242	19,498	0.5	2	6.957	0	17	1,352	2.0	136	10,458	13.7
Master's in related field		11,745	3.0	11	6,346	5.6	16	1,280	1.9	25	4,118	5.4
Doctorate in nursing		100	12	-	18	0.0	-	47	0.1	-	35	2
Doctorate in related field		1,622	5.0	10	726	0.3	2	218	0.3	10	679	0.9
Not known	16	1,327	0.3	:	;	:	*	;	:	:	:	1

1/ Include an estimated 2,581 nurses whose basic nursing education was in a master's degree, 171 in a doctoral program and 2,010 whose basic nursing was not known.

^{2/} Less than 0.1 percent.

Table 9. Primary focus of degree for registered nurses with post nursing education master's and/or doctoral degrees 1: March 1992.

rimery	Mas	Master's degree	9	Doct	Doctoral degree	
focus	Number	Estir	Estimated	Wurber	Esti	Estimated
	in sample	Number	Percent	in sample	Number	Percent
Total	5,485	175,888	100.0	179	11,113	100.0
United practice	1,110	76,281	43.4	12	774	7.0
ducation	54.1	39,272	22.3	99	4,085	36.8
upervision/administration	582	42,245	24.0	10	9%6	60
tesearch	2	163	0.1	63	3,721	33.5
ublic health	99	4,217	2.4	**	:	;
ther	181	13,041	7.4	17	1,426	12.8
Not known	0-	670	5.0	2	191	1.4

1/ Includes those nurses whose degrees were in nursing or related to their nursing career.

Table 10. Current enrollment of registered nurses in nursing-related educational program preparing for an academic degree, by employment status and student status:

March 1992

Employment and student status	Number in sample	Estimated Number	Percent
Total	2,700	190,013	100.0
Employed in nursing full-time			
Total	1,982	139,322	73.3
Full-time student	236	14,952	7.9
Part-time student	1,743	124,098	65.3
Status not known	3	272	0.1
Employed in nursing part-time			
Total	590	41,534	21.9
Full-time student	135	9,522	5.0
Part-time student	454	31,977	16.8
Status not known	1	35	0.0
Not employed in nursing			
Total	128	9,157	4.8
Full-time student	55	3,390	1.8
Part-time student	72	5,737	3.0
Status not known	1	30	0.0

Note: Estimated number and percent may not add to total because of rounding.

Table 11. Financial resources used for tuition and fees by registered nurses currently enrolled in nursing-related education program preparing for an academic degree, by type of degree for which studying: March 1992

		Total	1/	Sac	Saccoloureate	gs	Ha	Master's		Doct	Doctorate	
	Number	Estinated	per	Number	Estimated	mated	Number	Esti	Estimated	Number	Est	Estimated
Source of funding	in sample	Number	Percent	in sample	Number	Percent	in sample	Number	Percent	in sample	Number	Percent
				W								
Total	2,700	190,013	100.0	1,633	115,915	100.0	937	64,831	100,0	109	7,599	100.0
Personal resources	1,999	136,967	72.1	1,213	83,535	72.1	929	45.511	70.2	15	6.537	86.0
Employer reimbursement plan Federal traineeship.	1,422	105,801	55.7	206	67,552	58.3	476	35,284	54.4	23	2,543	33.5
scholarship, or grant	147	9,387	6.4	38	2,284	2.0	68	5,632	7.00	10	1.354	
Federally assisted loan	56	5,911	3.1	43	2,547	2.2	45	2,826	4.4	10	399	5.3
toan or scholarship Non-government scholarship	9	4,517	5.4	56	2,373	2.0	22	1,941	3.0	e.	203	2.7
loan or grant University teaching or	6	5,568	5.9	43	2,269	5.0	39	2,581	4.0	0	717	5.6
research fellowship	37	2,578	1.4	м	188	0.2	18	1,182	1.8	16	1,208	
Other sources	-	38	0.0	-	38	0.0	1	:	:	*	:	:
Source not known	4	305	0.2	-	69	0.1	2	154	0.2	:		:

^{1/} Source of funding may add to more than total because more than one source may be named,

^{3/} Include 97 nurses who were studying for an associate degree.

Table 12. Distribution of advanced practice nurses, by national certification and employment status March 1992

N N-H	Number				Not Certified	Dail I
		Percent	Number	Percent	Number	Percent
red in nursing position title						
le ritte	58,185	100.0	7,877	100.0	50,217	100.0
ritte	0.352	86.5	7.233	91.8	43,119	85.9
	1.541	19.8	3,313	42.0	8,228	16.4
	38,812	66.7	3,918	4.67	34,891	69.5
Not employed in rursing	7,833	13.5	979	8.2	7,098	14.1
Nurse practitioners						
Total ^{2/} 48	48,237	100.0	27,903	100.0	20,282	100.0
Employed in nursing	2,624	88.4	26,601	95.3	16,022	79.0
ie	20,733	43.0	16,477	59.0	4,255	21.0
Without position title 2	1,888	45.4	10,125	36.3	11,767	58.0
Not employed in runsing	5,614	11.6	1,302	4.7	4,260	21.0
Nurse anesthetists						
Total 2/ 23	25,238	100.0	20,539	100.0	669'5	100.0
Employed in nursing 21	21,776	86.3	19,053	92.8	2,723	57.9
	8,125	71.8	17,760	86.5	365	7.8
rie	3,651	14.5	1,293	6.3	2,258	86.6
	3,462	13.7	1,486	7.2	1,976	42.0
Nurse midwives						
Total ² /	7,405	100.0	5,011	100.0	2,394	100.0
	6,360	85.9	4,235	84.5	2,126	68.8
With position title	2,562	34.6	2,562	51.1		
	3,798	51.3	1,671	33.3	2,126	88.8
Wat employed in nursing	1,044	14.1	176	15.5	268	11.2

^{1/} Includes only those who had certification matching the type of formal preparation. Those with other types of certification (e.g. formal preparation as clinical nurse specialist but certified as nurse practitioner) are included with the not certified.

^{2/} Includes all those for whom it was determined that they had formal preparation for that category of advanced practice nurse.

Table 13. Employment setting of primary positions of registered nurses employed in nursing: March 1992

	in sample		Percent		Number in sample	Total	Estimated
Total	27,366	1,853,024	100.0	Student health service	730	909'05	2.7
1000	18 006	4 525 717	2 77	Soard of education	520	24, 776	2.0
Mospital	16,075	1 0.65 458	2,65	Defeate or parachial school	63	1,803	0.2
Non-Tederal Sport (erm nospital	1 334	RR 218	1,00	College or university	671	10,028	0.5
Mon-faderal rouch arriv hospital	407	30,235	2.1	A			
Federal dovernment hospital	986	59,722	2.5	Occupational health	302	19,266	2.7
Other hospital	1	717	1,	Private industry		15,750	8.0
CLIES HOSPITS				Government	58	3,516	0.2
Nursing home/extended care facility	1,996	128,983	7.0				
Nursing home unit in hospital	162	692'6	0.5	Ambulatory care setting	2,108	144,110	7,8
Other rursing home	1,625	104,906	5.7	Physician-based practices			
Mentally retarded facility	111	7,650	5.0	Solo practice	512	34, 144	1.8
Retired home residence	28	1,838	0.1	Partnership	539	16,957	0.0
Other extended care facility	20	4,820	0.3	Graup practice	481	32,179	1.7
district and page and page and				Freestanding clinic	283	18,684	1.0
				Anbulatory surgical center			
Mireina advention	583	36.514	2.0	(Non-hospital based)	157	10,163	9.0
Control of the contro	47	7.00 7	0.5	Nurse-based practices		0.000	
Distant program	12	2 540	1.0	Solo scarice	57	3.354	0.2
Annual program	158	0 411	5.0	Partnershin	-	73	1/
Associate degree program	000	003 74	0 0	Control of the Control	1 00	n n	1/
Baccataureate or higher degree	003	10000		al dept prince the factor	24.0	1 870	
Other nursing education	An .	2,000		Mixed professional	d		,
	2000	400 404		Trace of Contract	5	076 11	A 0
Community/public health setting	64017	180, 136	1	practice group	2 12	10 125	9 0
State health department	359	17,570		Health maintenance org.	113	14,063	0
State mental health department	25	4,036	0.2	Other ambulatory		-	
City or county health department	387	25,765	1.4	care setting	9	272	1/
Combination rursing services	12	833	1/		1,000,000	100	3
Visiting nurse service	482	34,350	e0, -	Other	757	56,263	3.0
Other home health agency				Non-nursing health personal		1000	10750
(non-hospital based)	809	58,088	2.1	education program	12	942	11
Community mental health service	107	7,218	5.0	Nurse entrepreneur	2	1,802	0.1
Neighborhood health center	130	8,527	0.5	Private duty in hone	4.3	3,472	0.2
Planned parenthood/				Central or regional			
family planning center	43	2,511	0.1	federal agency	89	4,022	2.0
Rural health care center	87	1,838	0.1	State board of nursing	7	327	1/
Day care center	30	2.761	0.1	Nursing or health association	14 "	1,159	0.1
Hospice	114	7,634	9.0	Health planning agency		2,967	0.5
Retirement community center	17	1.001	0.1	Prison or jail	105	8,539	0.5
Substance abuse out-nationt facility	31	2,079	0.1	Insurance company	271	19,602	1.0
Other setting	56	5,920	0.3	Other	182	13,431	0.7

1 Less than 0.1 percent
Note: Estimated number and percent may not add up to total because of rounding.

Table 14. Type of hospital work unit where hospital-employed registered nurses spent more than half their direct patient care time, by employment status: March 1992

Type of work unit	Tota			implayment full-time		*******
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Number	Percent	Number	Percent		part-time Percent
Total	1,119,800	100.0	757,021	100.0	362,778	100.0
Intensive care bed unit Step-down, transitional	203,169	18.1	144,519	19,1	58,651	16.2
bed unit	69,392	6.2	48,615	6.4	20,777	5.7
General/specialty bed unit	448,820	40.1	290,468	38.4		43.6
Dutpatient department	61,875	5.5	40,144	5.3	21,731	6.1
Operating room	93,310	8.3	72,826	9.6	20,484	5.6
Post operative recovery room	34,811	3.1	21,195	2.8	13,615	3.8
Labor/delivery room	63,333	5.7	38,247	5.1	25,086	6.9
Emergency room	76,380	6.8	53,166	7.0	23,214	6.4
Home health care	4,861	0.4	2,647	0.3		0.6
Hospice unit	2,320	0.2	1,688	0.2	632	0.2
Chemical dependency unit	4,386	0.4	3,049	0.4	1,337	0.4
Specialized Laboratories	10,367	0.9	8,394	1.1	1,973	0.5
Other specific area	5,858	0.5	4,358	0.6	1,500	0.4
No specific area	24,807	2.2	15,855	2.1		2.5
Not known	16,110	1.4	11,849	1.6	4,262	1.0

Table 15. Type of patient treated in hospital inpatient unit and outpatient department where registered nurses spent more than half their direct patient care time, by employment status: March 1992

				mployment		
Type of patient	Tot	The contract of the		full-time		part-time
treated	Number	Percent	Wumber	Percent	Number	Percent
Total	783,256	100.0	523,745	100.0	259,511	100.0
Chronic care	25,516	3.3	19,924	3.8	5,592	2.2
Coronary care	131,078	16.7	91,458	17.5	39,620	15.3
Weurological	18,846	2.4	13,996	2.7	4,850	1.9
Newborn	58,732	7.5	36,013	6.9	22,719	8.8
Obstetrics/gynecologic	38,311	4.9	20,882	4.0	17,429	6.7
Orthopedic	27,871	3.6	18,697	3.6	9,174	3.5
Pediatric	52,942	6.8	33,689	6.4	19,253	7.4
Psychiatric	58,901	7.5	43,293	8.3		6.0
Rehabilitation	22139	2.8	15178	2.9		2.7
Medical/surgical	316,456	40.4	211,130	40.3		40.6
Multiple unit	31,420	4.0	19,069	3.6		4.8
Wat known	1,043	0.1	416	0.1	626	0.2

Table 16. Registered nurses employed in each employment setting, by employment status and average annual hours worked: March 1992

	Est	Estimated total	otal	Em	Employed full-time	1-time	En	Employed par	part-time
Field of employment	Number		Average appropri	Rumber		Acceptance opposite	Number		
	nurses	Percent	hours worked	rurses	Percent	hours worked	nurses	Percent	Percent hours worked
Total	1,853,024	100.0	1,728	1,275,947	6,89	2,004	577,077	31.1	1,110
Hospital	1,232,717	100.0	1,750	850,969	0.69	2,013	381,748	31.0	1,160
care facility	128,983	100,0	1,735	86,027	7.99	2,063	42,956	33.3	1,059
Nursing education	36,514	100.0	1,552	27,241	24.6	1,773	9,273	25.4	893
health setting	180,132	100,0	1,732	124,314	0.69	2,047	55,818	31.0	1,025
Student health service	50,606	100,0	1,382	38,285	75.7	1,568	12,322	24.3	785
Occupational health	19,266	100.0	1,797	14,687	76.2	2,061	4,579	23.8	890
(Non-nurse)	138,290	100.0	1.643	84, 250	9 99	2 022	070 75	102	1 051
Ambulatory care setting					0.000000				
(Nurse)	5,820	100.0	1,589	3,640	62.5	1,980	2,180	37.5	096
Other	56,263	100.0	1,835	43,774	77.8	2,068	12,489	22.2	960
Not known	4,433	100.0	1,614	2,759	62.2	1.954	1.674	37.8	962

Note: Number may not add up to total because of rounding.

Table 17. Comparison between average scheduled hours per week of employed registered nurses in their principal position and average actual hours worked during week beginning March 23, 1992, by employment setting:

Field of employment	Employed in Scheduled hour/week	Employed in nursing full-time Scheduled Actual hour/week hour/week	Employed in r Scheduled hour/week	Employed in nursing part-time Scheduled Actual hour/week hour/week
fotal	39.5	41,7	22.9	24.5
Hospital	39.4	61.6	23.5	29.52
Nursing home, extended				
care facility	40.2	42.4	22.1	23.9
rsing education	40.0	46.4	23.8	22.5
mmunity/public				
health setting	39.9	41.6	21.7	22.9
udent health	37.6	38.8	20.9	25.6
Occupational health	40.0	42.9	21.6	26.0
bulatory care setting				
(Non rurse)	32.4	41.1	21.3	22.4
(Nurse)	32.7	42.7	22.1	22.0
Other	36.1	42.9	21.2	23.1

Table 18. Employed registered nurses by field of employment and age group: March 1992

						Age	dhoufi a					
rield of esployment	in sample	Fotal	S der	25-29	30-34	35-39	77-07	67-53	50-54	65-55	99-09	over over
Total	27,366	1,853,024	46,903	159,370	955'962	376,592	319,071	225,541	167,164	121,562	66,733	31,898
Nospital	18,095	1,232,717	41,673	157,176	226,514	267,589	206,083	133,010	90,433	58,497		11,347
care facility Mursing education	1,996	128,983	1,734	7,531	10,566	17,692	15,824	21,493	16,811	17,155	9,338	9,581
Community/public health setting	2,694	180,132	1,428	10,630	24,745	35,235	36,662	23,888	19,263	15,521	7,484	4,092
Student health service	2002	50,606	52	852	2,571	6,838	9,616	9,770	7,724	7,378	3,342	1,921
Ambulatory care setting	2,108	144,110	1,228	8,528	21,055	28,837	28,439	19,641	15, 165	11,371	6.249	2.873
Other	757	56,263	144	2,622	6,314	11,471	12,149	7,863	7.816	3.969	2,558	1,162
Not known	71	4,433	514	821	788	873	732	220	380	11	36	8

1/ Includes an estimated 11,634 nurses for whom age was not known.

Note: Number may not add up to total because of rounding.

Table 19, Field of employment and highest nursing-related educational preparation of registered nurses employed in nursing: March 1992

	11 ambour	Berimstad	later	Dioto	100	Associate	Highest	nursing-rel Baccalau	ated educational	ational pr Maste	preparation ster's	Doc	torate
Field of employment	in sample Number	n sample Number Percent	Percent	Number Per	Percent	Number	Percent	Number	Number Percent	Number Per	Percent	Number	Number Percent
Total	27,336	27,336 1,853,024 100.0	100,0	557,585	30.1		31.0	574,547	31.0	136,767	7.4	9,562	0.5
Hospital	18,095	18,095 1,232,717	100,0	339,531	27.5	420,064	34.1	397,982	32.3	72,903	5.9	1,773	0.2
Nursing home, extended	1 004			58.654	45.5	40.932	31.7	24,749	19.2	4,480	3.4	168	0.1
Nursing education	583	36,514	100.0	2,627	7.2	1,647	4.5	5,782	15.8	20,397	55.9	6,062	16.6
Community/public	2.694	180,132		50,513	28.0	49,535	27.5	63,683	35.4	16,022	8.9	380	0.2
Ctudent health corvins	730	50.606		17,693	35.0	8,215	16.2	18,418	36.4	6,084	12.1	196	7.0
Occupational health	302	19.266		9. SB4	49.7	3,921	20.4	4,205	21.8	1,555	8,0	:	
Ambulatory care certing	2.108	144,110		58,906	6.03	34,751	24.1	39,449	27.4	10,361	7.2	545	5.0
Orher		56.263	100.0	18,974	33.7	12,985	23.1	19,049	33.9	4,915	8.7	341	9.0
Not known	77	4,433	100.0	1,103	24.9	2,049	46.2	1,231	27.8	20	1.1	:	:

1/ Includes an estimated 465 nurses who did not indicate highest nursing-related educational preparation.

Note: Number may not add up to total because of rounding.

Table 20, Employment setting of registered nurses by work basis: March 1992

	100 mm	Total		Emple	Employee of agent	Å:	Tempo	emporary agen	c,	Self	employed	
Number Field of employment in sample	Number n sample	Estinat	Percent	Number in sample	Estina Number	Percent	Number in sample	Tota	Estimated il Percent	Number in sample	Estimated Total Perc	Percent
Total	27,336	27,336 1,853,024	100.0	26,251	1,781,102	1.96	537	35,506	1.9	523	34,595	6.1
Hospital	18,095	1,232,717	100.0	17,623	1,205,854	97.8	321	18,020	1.5	138	7,705	9.0
Nursing home, extended	1 004	128 983	1000	1 026	121 676	0 50	1	2 607	0	7.0	2 484	,
Nursing education	583	36.514	100.0	572	35,958	98.5	-	18	0.1	0	510	7.1
Community/public								8				
health setting	2,694	180,132	100.0	2,467	162,230	90.1	122	10,056	5.6	101	7,592	4.2
Student health service	730	50,606	100,0	718	49,704	98.2	rv.	152	0.3	10	750	5.5
Occupational health	302	19,266	100.0	592	16,257	84.4	13	1,077	5.6	52	1,932	10.0
Ambulatory care setting		144,110	100.0	1,995	136,851	95.0	12	736	0.5	100	6,501	4.5
Other	757	56,263	100.0	628	46,943	83.4	28	2,293	4.1	96	6,803	12.1
Wat known	71	4,433	100.0	90	3,629	81.9	1	547	12.3	2	107	2.4

Note: Number and percent may not add up to total because of rounding.

Table 21. Position titles in primary nursing jobs for registered nurses employed in nursing: March 1992

Position title	146.3		
Position title	in sample	Number	Percent
Total	27,336	1,853,024	100
Administrator	1,744	114,619	6.2
Administrator or assistant	616	42,534	2.3
Dean, director, or assistant/associate	- 10	40,100	-
director of nursing education	210	13,510	0.7
Director or assistant/associate			2730
	918	58,575	3.2
director of nursing service	710	20,272	3.5
Certified nurse anesthetist	350	18,617	1.0
Clinical nurse specialist	519	35,524	1.9
ton of the companies and the	253		
Consul tant	250	16,771	0.9
Head nurse or assistant	1,197	84,726	4.6
Instructor	988	64,349	3.5
Inservice education director	17.		
or instructor	319	21,333	1.2
Instructor	456	29,777	1.6
Professor or assistant/associate	213	13,239	0.7
L10153201 01 033131911/4030018/4	2.12	101000	
Nurse clinician	327	24,824	1,3
Nurse practitioner/midwife	409	26,704	1.4
Nurse midwife	46	3,045	0.2
Nurse practitioner	363	23,659	1.2
Private duty nurse	147	11,651	0.6
Researcher	103	7,800	0.4
Staff nurse	18,244	1,233,537	66.6
	2,780	177,608	9.6
Charge nurse		139,835	7.5
General duty nurse	2,155		
Public health nurse	502	32,036	1.7
School nurse	572	40,263	2.2
Staff nurse	11,699	806,680	43.6
Team Leader	251	18,192	1.0
No position title	285	18,923	1.0
Supervisor or assistant	1,359	92,080	5.0
Other	1,674	120,024	6.5
Nurse coordinator	442	29,148	1.6
	286	20,175	1.1
Patient care coordinator	347	27,386	1.5
Quality assurance nurse	86	5,504	0.3
Infection control nurse			
Discharge planner	91	7,010	0.4
Insurance reviewer	169	12,884	0.7
Other	253	17,917	1.0

Note: Estimated number and percent may not add up to total because of rounding.

Table 22, Field of employment and type of position of employed registerd nurses: March 1992

		Administrator		Supervisor		mead Purse	Start or
field of Esployment	Total	or assistant	Consultant	or assistant	Instructor	or assistant	gen, duty nurse
Total	1,853,024	114,6191	16,771	92,080	64,349	84,726	1,233,537
Hospital	1,232,717	40,181	2,161	43,855	19,454	68,423	932,164
care facility	128,983	31,505	2,289	18,786	6,671	4,926	55,236
Nursing education	36,514	3,253	112	:	31,355	22	1,068
health setting	150,132	20,124	3,413	17,255	1,589	2,179	92,884
Student health service	50,606	1,551	32	279	2,543	359	41,307
Occupational health	19,266	1,906	1,079	1,905	103	933	11,278
Ambulatory care setting	144,110	10,203	1,116	6,339	918	6,802	83,622
Other	56,263	5,705	6,569	3,025	1,695	867	12,750
Not known	4,433	101	:	268	51	214	3,228
	Nurse	Clinical	Nurse	Certified			
Field of Employment	practitioner/ midwife	rurse specialist	clinician	nurse anesthetist	Researcher	Private	Other
Total	26,704	35,524	24,824	18,617	7,800	11,651	120,024
Mospital	7,624	23,360	15,043	15,826	3.591	2.477	877.448
Nursing home, extended							
care facility	348	929	396		;	439	7,737
Nursing education Community/oublic	207	:	1		7.5	:	422
health setting	6,049	4,005	3,990	53	554	5.884	22,107
Student health service	1,660	372				:	1.491
Occupational health	568	179	186	31		1	1,097
Ambulatory care setting	9,810	6,394	4,755	2,351		459	10,220
Other	438	578	454	186	2,159	2,392	19,408
Hor Venier	4	;		120	4.3		900

1/ Include an estimated 1,798 rurses whose type of position is not known. Note: Number may not add up to total because of rounding.

Table 23. Type of position and highest nursing-related educational preparation of registered nurses employed in nursing: Narch 1992

and the second second	Manhor	1 400	mer Facel	Distora	000	Accortas	Highest e degree	nursing-r	related oc	ucatio	n preparation Master's	Doctorate	916
Position titre	in sample	Kurber	Percent	Number	Percent	Number	Aurber Percent		Percent	Numbe	Percent	Number	Percen
Total	27,336	1,853,024	100.0	582,585	30.1	\$74,099	31.0	574,547	31.0	136,767	7.4	9,562	0.5
Administrator or assistant	1 744	114,619		32.924	28.7	22,675	19.8	31,293	27.3	25,167	21.9	2,561	2.5
Coppelitant	250	16, 771		4, 729	28.2	2,553	15.2	6,312	37.6	2,809	16.8	366	2.5
Constitution of age in and	1 150	92,080		33, 152	36.0	27,241	29.6	25,149	27.3	6,450	7.0	19	0,1
Instructor	988	675 79	100.0	8.842	13.7	5,405	8.4	18,099	28.5	26,896	41.8	5,109	8.0
Head nurse or assistant	1 197	84, 726	100.0	26,111	30.8	23,891	28.2	27,964	33.0	6,760	8.0	:	4
Chaff parts	18 244	1 233 537	100.0	384,625	31.2	440,286	35.7	381,933	31.0	25,893	2.1	365	0.25
Muses seed in least Inches to	607	26.704	100.0	4, 228	15.8	3,297	12.3	7.379	27.6	11,651	43.7	149	0.0
reliated special for	510	35.524	100.0	5.512	15.5	6,827	19.2	9,330	26.3	13,448	37.8	408	1.0
Nurse of folding	327	24,824	100.0	5.684	22.9	5,324	21.4	10,720	43.2	3,096	12.5	1	
Corrigion corres appearing	150	18 617	100.0	6.637	34.6	3.077	16.5	5,984	32.1	3,112	16.8	:	;
Becomber 121 34 miles 121	103	7,800	100.0	2,173	27.9	897	11.5	3,420	43.8	587	11.4	422	5.5
Charles of the Charles	171	11 651	100.0	4 995	42.9	3,402	20.2	3,119	26.7	135		1	:
Other	1.674	120.024	100.0	37,397	31.2	28,577	23.8	43,515	36.3	10,419	8.7	117	0.1
Not known	2	1,798	100.0	776	43.1	547	36.0	332	18.5	77	2.4		

1/ Includes an estimated 465 nurses who did not indicate highest nursing-related educational preparation.

Table 24. Distribution of employed registered nurses by percentage of time spent during usual work week in each functional areas March 1992

	Admin	Administration		Coms	Consultation		Direct	patient care	
Percentage of time	Number In sample	Estimated Number Pe	Percent	Number in sample	Estimated	Percent	Number in sample	Estimated Number P	Percent
Total	27,336	1,853,024	100.0	27,336	1,853,024	100.0	27,336	1,853,024	100.0
None	14,811	1,008,498	54.4	15,426	1,051,549	56.7	3,521	247,403	13.4
1-24	6,112	402.674	21.7	9,598	640,292	34.6	2,524	167,118	6.
07-50	2.928	200,801	10.8	1.427	97,823	5.3	2,171	145,700	7.
50.75	1,956	133,807	7.2	410	28,901	1.6	4,675	314,996	17.0
75-100	1,337	92,808	5.0	283	20,022	1:1	14,253	963,370	52.0
Not known	192	14,437	0.8	192	14,437	0.8	192	14,437	0.8
	Res	Research		Super	Supervision		Teax	Teaching	
Percentage of time	Number	Estinated	ted	Number	Estimoted	ted	Number	Estimated	sted
	in sample	Number	Percent	in sample	Number	Percent	in sample	Number	Percent
Total	27,336	1,853,024	100.0	27,336	1,853,024	100.0	27,336	1,853,024	100.0
None	23,307	1,580,054	85.3	15,585	1,061,577	57.3	20,253	1,385,747	74.8
1-24	3,445	231,445	12.5	7,252	488,134	26.3	5,372	351,586	19.0
25-49	211	13,641	0.7	2,340	154,777	8.4	656	44,964	2.4
50-74	96	9,990	9.0	1,281	86,424	4.7	315	20,902	-
75-100	85	6,457	0.3	686	47,676	2.6	548	35,408	1.0
Not known	192	14,437	0.8	192	14,437	0.8	192	14,437	0.8

Note: Number and percent may not add to total because of rounding.

Table 25. Average percent of time in work week spent by registered nurses in each function, by highest educational preparation: March 1992

	Average percen	t of time spent in:	0.000
Highest educational preparation	Administration	Consultation	Direct patient care
			ů,
Total	14.4	6.8	62.0
Diploma	14.3	6.0	64.1
Associate degree	11.0	5.9	8.8
Baccalaureate	14.9	7.8	61.1
Master's	25.5	10.5	32.2
Doctorate	31.3	9.6	6.8
Wat known	2.1	0.7	91.4

lighest educational			
preparation	Research	Supervision	Teaching
Total	1.6	10.2	4.7
Diplona	1.4	10.9	2.9
Associate degree	1.2	10.3	2.8
Baccalaureate	1.8	9.7	4.5
Master's	2.6	9.7	19.3
Doctorate	13.1	4.3	34.8
Not known	0.5	4.6	0.7

Table 26. Average annual earnings of registered nurses employed full-time in their principal nursing position by field of employment and type of position: March 1992

		Administrator	96	Supervisor		Head nurse or	Staff	Nurse
Field of exployment	Total 1/	assistant	Consultant	assistant	Instructor	assistant		midwife
	-	****	100 000	050 050	700 740	411 048	436 343	417 474
Total	\$37,738	170,674	0/0"1%	474 oce	930,070	941,000	313700B	000,000
Hospital	39,253	51,884	2/	42,948	41,455	42,589	36,618	46,689
Nursing home, extended								
care facility	33,846	36,497	12	32,569	30,930	34,566	31,298	/2
Nursing education	38,271	54,093	12	57	36,071	57	12	12
Community/public								
bealth setting	35.298	41,877	40,861	35,423	5/	32,799	32,621	40,602
Student health service	28,316	21	57	12	31,016	12	27,227	27
Occupational health	36,685	12	51	38,439	77	12	33,854	27
Ambulatory care setting	34,527	46,693	12	38,330	57	32,717	27,949	44,268
Orther	37,724	48,317	41,587	38,301	12	21	33,835	2/

field of employment	ctinical	Nurse	Certified nurse anethetist	Researcher
fotal	\$41,226	\$38,307	\$76,053	\$39,218
Mospital	42,422	906'07	75,712	38,635
Nursing home, extended care facilty	77	2/	2/	2/
Wursing education	12	12	12	57
Community/public	37, 214	34, 721	72	2/
Student health service	2/	12	12	2/
Occupational health	57	57	21	21
Arbulatory care setting	38,787	32,476	21	12
Other	. 27	12	12	57

¹/₁ includes all registered nurses in positions not separately identified as well as those itemized separately.

²⁾ Too few to compute average.

Table 27. Average annual earnings of registered nurses employed full-time by type of position and highest educational preparation: Narch 1992

Type of position	Total 1	Diptoma	Associate	Highest educational preparation Baccalaureate Master's Doctors	Master's	Doctorate
Total	\$37,738	\$36,755	\$35,258	\$38,724	\$45,463	\$50,646
dministrator or assistant	45,071	41,021	38,700	45,015	53,605	27
consultant	41,076	40,221	43,158	37,905	46,395	3/
Supervisor or assistant	38,979	37,119	36,725	41,864	45,083	27
nstructor	36,896	35,358	31,724	35,297	37,243	45,014
lead nurse or assistant	41,068	40,101	38,288	42,964	46,057	3/
Staff nurse	35,212	34,805	34,072	36,552	41,553	12
Nurse practitioner/midwife	43,636	38,766	48,740	41,738	45,298	12
Clinical specialist	41,226	37,793	36,726	672.07	44,268	12
Nurse clinician	38,307	35,904	37,447	38,948	41,610	3/
Certified nurse anesthetist	76,053	77,764	79,962	76,116	68,518	3/
besearcher	39,218	27	27	38,678	21	2/
Private duty nurse	37,770	27	2/	2/	2/	3/
Other	37,587	35,806	35,764	38,329	44,481	27

^{1/} Include all registered nurses not saparated identified as well as those itemized separately.

^{2/} Too few to compute average.

^{3/} There are no cases.

Table 28. Distribution of employed registered nurses with added positions, by employment in their principal position and average total earnings: March 1992

		Total 1			Employment Full	t status -tine	Employment status in principal position Full-time Part	position Part-time	time	
Positions held	Number in sample	Estin	Percent	Average total earnings	Estimated Number Per	Percent	Average total earnings	Estin	Estimated ther Percent	Average total earnings
Total	27,336	1,853,024	100.0	\$33,898	1,275,947	100.0	\$38,891	277,077	100.0	\$22,409
Secondary positions Principal position only	4,535	303,348	16.4	\$39,674	1,079,258	15.4	\$45,258	107,407	18.6	\$28,959

1/ Includes an estimated 1,017 registered nurses whose number of positions held was not known.

Table 29. Distribution of registered nurses not employed in nursing, by length of time since last worked as a nurse and whether nurse was seeking nursing position or had other occupation: March 1992

ength of time	To	tal		Seeking	nursing	Has othe	r .
since last	Kumber	Estin	ated	empl cyme	nt	occupati	on
orked	in sample	Number	Percent	Number	Percent	Number	Percent
Total	4,968	386,791	100.0	28,603	100.0	99,9551	100.0
Less than a year	793	55,003	14.2	10,855	38.0	9,916	9.9
1-4 years	1,688	119,687	30.9	8,288	29.0	26,510	26.5
5-9 years	1,088	91,102	23.6	4,329	15.1	27,490	27.5
10-19 years	794	67,727	17.5	2,955	10.3	20,429	20.4
20-29 years	247	22,244	5.8	1,093	3.8	7,522	7.5
30 years or more	160	15,433	4.0	269	0.9	3,196	3.2
Never worked	64	4,471	1.2	453	1.6	1,806	1.8
Not known	134	11,123	2.9	360	1.3	3,087	3.1

 $^{^{1/}}$ Includes an estimated 6,034 nurses who were also seeking nursing positions.

Table 30. Registered nurses actively seeking nursing employment, by type of employment sought and number of weeks looking: March 1992

Type of employment and	Number	Estimat	ted
weeks looking	in sample	Mumber	Percent
Total	374	28,603	100.0
Type of employment			
Full time	92	6,987	24.4
Part time	216	16,189	56.6
Either	60	5,103	17.8
Not known	6	323	1.1
Number of weeks Looking			
Less than a week	91	6,460	22.6
1-4 weeks	126	9,136	31.9
5-9 weeks	47	3,939	13.8
10-14 weeks	30	2,343	8.2
15-34 weeks	39	3,347	11.7
35 weeks or over	26	2,421	8.5
Nat known	15	957	3.3

Table 31. Type of employment of registered nurses employed in non-nursing occupation: March 1992

Type of employment	Number in sample	Estin Number	nated Percent
Type of enproyment	III sampte	Hallour	rercen
Total	1,311	99,955	100.0
Health-related occupation	572	43,657	43.7
Full time	411	32,000	32.0
Part time	132	9,247	9.3
Not known	29	2,410	2.4
Won health-related occupation	733	55,748	55.8
Full time	444	32,250	32.3
Part time	288	23,364	23.4
Not known	1	134	0,1
Not known	6	551	0.6

^{1/} Includes an estimated 6,034 nurses employed in a non-nursing field, but actively seeking nursing employment.

Note: Estimated number and percent may not add to total because of rounding.

Table 32. Reasons for registered nurses to have occupation other than nursing: March 1992

Reasons for	Number	Esti	nated
other occupation	in sample	Number	Percent
Total	1,311	99,9552	100.0
Difficult to find a position Hours are more convenient	28	1,770	1.8
in other position Better salaries available in	580	43,761	43.8
current type of position Concern for safety in health	398	30,414	30.4
care environment Inability to practice nursing	233	18,292	18.3
on a professional level Find current position	121	B,994	9.0
more rewarding professionally	553	40,855	40.9
Nursing skills are out of date	278	23,327	23.3
Other	360	26,292	26.3

^{1/} Estimates and percent may not add up to total because registered nurses may answer to more than one reason.

 $^{^{2/}}$ Includes an estimate of 7,443 registered nurses whose reasons for having an occupation other than a nurse were not known.

Table 33. Age group and marital status of nurses who are not employed: March 1992

Marital status	Total	al	Less	than 40	7-07	40-49 Age	group 50-59	59	pur 09	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	264,267	100.0	51,717	100.0	30,403	100.0	45,504	100,0	133,829	100.0
Married										
With children under 6 only	21,384	6.1	19,188	37.1	1,877	6.2	117	0.3	150	0.1
With children 6 and over only	40,808	15.4	7,236	14.0	16,277	53.5	9,196	20.2	7,928	5.9
With children, both sue groups	22,250	8.4	17,530	33.9	4, 137	13.6	80	0.2	421	0.3
No children at home	106,370	40.3	2,875	5.6	4,208	13.8	28,505	62.6	70,353	52.6
No information on children	268	0.1	102	0.2	159	5.0	14	;	22	1
Widowed, divorced, separated	52,527	19.9	1,178	2.3	2,694	8.9	605'5	11,9	42,674	31.9
Never married	15,765	0.0	2,838	5,5	746	5.5	1,616	3.6	10,338	7.7
No information on marital status	4,895	0.0	277	1.5	335	-	566	1.2	1,943	1.5

1/ includes 2,814 nurses whose age was not known.

Note: Estimated number and percent may not add to total because of rounding.

Table 34. Comparison between State of location^{1/} of registered rurses as of March 1992 and State of graduation, by type of basic rursing education and rumber of years since graduation: March 1992

Number of year since		-	Total 2/			Ba	Basic nursing education	g education	-	
graduation from basic rursing education program		Number in sample	Estimated Number Perc	Percent	Diploma	Percent	Associate Number 8	degree	Baccalaureate Number Percer	Percent
Total 3/	1 8	32,001	2,209,489	100.0		100.0	727,102	100.0	544,533	100.0
Located in same State	4	18,790	1,405,772	64.0	541,403	58.0	550,276	75.7	312,510	57.4
Located in different State		13,211	803,716	36.0	392,804	42.0	176,827	24.3	232,022	45.6
Less than 5 years		4,587		100.0	29,330	100.0	181,287	100.0	93,739	100.0
Located in same State	4	3,473		81.0	24,036	82.0	155,275	85.7	67,559	72.1
Located in different State		1,114	57,858	10.0	5,293	18.0	26,013	14.3	26,180	57.9
5-9 years	1	5,520	374,522	100,0	55,432	100.0	192,925	100.0	125,337	100.0
Located in same State	4	3,661	267,661	72.0	40,590	73.2	147,999	7.97	78,567	62.7
Located in different State	-	1,859	106,861	28.0	14,842	26.8	44,926	23.3	46,770	37.3
10-14 years	-	5,479	373,492	100.0	77,611	100.0	165,515	100.0	129,853	100.0
Located in same State	4/	3,319	243,222	65.0	51,704	9.99	120,342	72.7	70,979	24.7
Located in different State		2,160	130,270	35.0	25,907	33.4	45,172	27.3	58,874	45.3
15 years or more		16,354	1,152,272	100.0		100,0	186,416	100,0		100.0
Located in same State	ŧ	8,299	645, 129	56.0	424,013	55.1	125,907	67.5	54,743	48.7
Located in different State		8,055	507,143	44.0		6.44	60,510	32.5		51.3

W State of location is the State in which employed, if employed in nursing, or the State of residence, if not employed in nursing.

^{2/} includes those who graduated from basic nursing education program granting a master's or doctoral degree or for whom the type of basic nursing education was not known.

^{3/} Excludes an estimated 30,327 nurses for whom the State of graduation was not known.

^{4/} Includes those who graduated from a school located in a different State or a foreign country.

Table 35. Comparison between resident states in 1991 and 1992 for the registered runse population, by age group, as of March 1992

		1	7	in 1991 and 1992	nd 1992	than	than in 1991
Age group	in sample	Number Percen	Percent	Number	r Percent	Number	Percent
Total	32,304	2,239,816	100,0	2,168,745	100.0	70,770	100.0
Less than 25 years	679	47,625	2.1	42,963	2.0	4,662	6.6
25-29	2.910	198,405	0.0	183,989	8.5	14,416	20.4
30-34	4,786	328,190	14.7	312,237	14.4	15,727	22.3
18-30	6.258	421,553	18.8	408,851	18.9	12,702	17.9
77-07	572 5	355, 709	15.9	347,899	16.0	7,900	11.2
67-57	3.814	259,093	11.6	254,036	11.7	5,057	7.1
20-05	2,893	202,111	9.0	198,098	9.1	4,013	5.7
05+50	2.258	164,273	7.3	161,595	7.5	2,677	20.00
79-09	1,662	120,687	5.4	118,586	5.5	2,101	3.0
65 years and over	1.594	126,476	5.6	125,267	5.8	1,209	1.7
	202	15,603	0.7	15,223	0.7	306	4.0

1/ Location in 1991 may be in a different State or in a foreign country.

Note: Estimated number and percent may not add to total because of rounding.

Table 36. Comparison of employment status of registered nurse population between 1991 and 1992: March 1992

	Employed	full-time 1991	1	Employed pa	100	16	Not Empt	0yed 1991	
Employment status in 1992	Number In sample	Number	Percent	Number in sample	Estimated Number Po	Percent	Number Estimate in sample Number	Number	Percent
Total 1/	18,086	1,225,188	100.0	8,222	562,823	100.0	5,376	409,102	100.0
Employed full-time Employed part-time Not employed	16,721 992 373	1,134,566	92.6	985 6,773 464	65,435	11.6 82.6 5.8	752 566 4,058	36,719	12.1

^{1/} Excludes an estimated 42,703 nurses whose employment status was not known in 1991.

Table 37. Percent distribution of registered nurses in each employment setting in 1992, by employment setting in 1991: March 1992

Finolovment		Total			Nursing h	Setting in 19 one	791 Public/	Ambulato	L.	
setting in 1992	Number in sample	Estimated Number Per	Percent	Hospital	Extended	Extended Nursing care Education	community health	setting	Other	Not employed
Total	27,336	1,853,0242	100.0	0.29	4.9	1.8	11.9	7.0	2.6	5.7
Hospital	18,095	1,232,717	100.0	91.6	0.5	0.2	6.0	9.0	0.3	5.4
Nursing home, extended care facility	1,996	128,983	100,0	6.2	82.0	0.0	2,3	5.0	6.0	9.9
Nursing education	583	36,514	100.0	7.8	1.0	81.0	2,8	1.0	9.0	7.4
Community/Public, health setting	3,726	250,004	100.0	6.7	1.5	0.2	70.7	1.4	0.8	6.2
Ambulatory care setting	2,108	144,110	100.0	9.2	0.7	0.2	2.0	80.7	0.0	5.7
Other	757	56,263	100.0	11.3	1.3	0.4	5.1	1.2	72.3	7.8

^{1/} Includes student and occupational health.

Note: Estimated percent may not add up to total because of rounding.

^{2/} Includes an estimated 4,433 registered nurses whose employment setting in 1991 and/or 1992 was not known.

Table 38. Registered nurse population in each State and area, by activity status: March 1992

State and area	Number in sample	Total	Employed in nursing Number Percen	Percent	in nursing Number	Percent	per 100,000,
United States	32,304	2,239,816	1,853,024	82.7	386,791	17.3	726
New England	3.317	163,198	130.860	80.2	32,338	19.8	991
Connections	577	01 240	30 018	K	10,320	25.0	676
S S S S S S S S S S S S S S S S S S S	805	12,731	10,584	83.1	2,147	16.0	857
Nassachusetts	710	78.322	63, 751	81.4	14, 571	18.6	1.063
New Hampshire	969	13,036	10,743	82.4	2,293	17.6	196
Rhode island	510	11.564	9,665	83.6	1.890	16.4	296
Vermont	417	6,307	5,199	82.4	1,108	17.6	912
Hiddle Atlantic	3,246	415,346	332,478	80.0	82,868	20.0	877
New Jersey	673	82,555	64, 510	78.2	18,037	21.8	828
New York	1.409	189.342	159,297	84.1	30,045	15.0	879
Permsylvania	1,164	143,449	108,663	73.8	34,786	24.2	506
East North Central	3,706	400.313	327.794	9.18	72.519	18.1	7.97
Ittinois	871	110,762	93.069	84.0	17,692	16.0	800
Indiana	626	49, 153	39,602	80.6	9.551	7.6	669
Nichigan	979	85,544	65,441	76.5	20,103	23.5	693
ohio	983	107,950	89,799	83.2	18,151	16.8	815
Wisconsin	585	506'95	39,883	85.0	7,022	15.0	797
West North Central	3,915	175,142	153,907	87.9	21,236	12.1	857
Iowa	631	29,743	25,838	86.9	3,906	13.1	919
Kansas	581	22,301	19,773	88.7	2,528	11,3	784
Mirmesota	678	45,681	39,876	87.3	5,805	12.7	890
Missouri	909	48,167	42,035	87.3	6,132	12.7	809
Nebraska	965	14,829	13,257	7.68	1,572	10.6	825
North Dakota	476	6,718	6,300	93.8	418	6.3	001
South Dakota	675	7,704	6,828	88.6	876	9.11	960
South Atlantic	5,549	384,681	316,317	82.2	68,364	17.8	702
Delaware	396	7,463	6,137	82.2	1,326	17.8	891
Dist. of Columbia	307	11,812	11,352	96.1	461	3.0	1,927
Florida	1,060	119,405	94,591	79.2	24,813	20.8	701
Georgia	777	51,412	43,386	34.4	8,026	15.6	663
Maryland	630	43,823	38,170	87.1	5,653	12.9	778
North Carolina	791	56,943	47,602	83.6	9,341	16.4	969
South Carolina	247	24,265	20,684	85.2	3,581	8.71	574
Virginia	409	54,958	42,519	77.4	12,439	22.6	299
User Virginia	077	16, 600	11 875	81.3	2 726	18.7	929

Table 38. (cont.) Registered nurse population in each State and area, by activity status: March 1992

State and area	Number in sample	Total	Employed Number	Employed in nursing Number Percent	Not employed in nursing Number	ng Percent	per 100,000 population 1/
East South Central	2,328	115,585	101,002	4.78	14,583	12.6	980
Alabama	612	31,908	27,717	6.98	4, 191	13.1	670
Kentucky	552	28,154	24,552	87.2	3,603	12.8	459
Missisippi	487	15,334	13,415	87.5	1,919	12.5	513
Tennessee	229	40,188	35,318	87.9	4,870	12.1	703
West South Central	2,502	177,039	148,016	83.6	29,022	16.4	537
Arkansas	455	17,059	14,001	82.1	3,058	17.9	58%
Louisiana	542	28,169	24,233	86.0	3,936	14.0	299
Ok Lahoma	541	20,032	16,972	84.7	3,060	15.3	528
Texas	996	111,778	92,810	83.0	18,968	17.0	526
Mountain	4,217	114,387	94,731	82.8	19,657	17.2	629
Arizona	909	32,988	27,093	82.1	5,895	17.9	707
Colorado	722	31,948	26,697	83.6	5,251	16.4	592
Idaho	508	7,287	5,702	78.2	1,585	21.8	534
Montana	513	7,370	5,848	70.3	1,522	20.7	710
Nevada	717	8,943	7,135	70.8	1,809	20.2	538
New Mexico	447	11,121	9,393	84.5	1,728	15.5	594
Utah	589	11,195	9,831	87.8	1,364	12.2	245
Wyoming	418	3,536	3,032	85.7	504	14.3	651
Pacific		294,124	247,920	84.3	46,204	15.7	609
Alaska	378	4,153	3,583	86.3	570	13.7	610
Catifornia		207,563	173,973	83.8	33,590	16.2	564
Hawaii		9,222	7,674	83.2	1.547	16.8	299
Dregon		26,561	23,992	90.3	2,569	7.6	306
Washington		46.626	38.698	83.0	7.928	17.0	753

¹⁷ Population data were based on estimates of resident population of States in U.S. Department of Commerce News: 1991 - 1992, CB92-276. Issued Dec. 1992

Table 39. Supply of registered nurse in each State and area according to whether employed on a full-time or part-time basis:

Narch 1992

	Number	Est	Estimated	Estimated	Estimated	Est	Estinated	Full-time
	in sample	Number	Percent	Number	Percent	Number	Percent	Equivalent 1/
United States	7,336	1,853,024	100.0	1,275,947	6.83	577,077	31.1	1,564,486
New England	2.776	130,860	100.0	77,239	0.65	53,621	41.0	104,050
Connecticut	44.1	30,010	100.0	18,249	59.0	12,670	41.0	24,584
Haine	501	10,584	100.0	969'9	63.3	3,889	36.7	8,641
Massachusetts	586	63,751	100.0	36,875	57.8	26,875	42.2	50,313
New Hampshire	432	10,743	100.0	6,644	61.8	4,099	38.2	8,694
Shode Island	434	9.665	100.0	5,846	5009	3,819	39.5	7,756
Vermont	382	5,199	100.0	2,930	56.4	2,269	43.6	4,065
Widelle Atlantic	2.500	332,478	100.0	231,705	2.69	100,773	30.3	282,092
New Jenney	530	64, 518	100.0	44, 287	68.6	20,232	31.4	54,403
1 3 LON 1 3 LO	1,180	159,297	100.0	113,931	71.5	45,365	28.5	136,614
Pennsylvania	889	108,663	100.0	73,488	9.19	35,175	32.4	91,076
Fact Morth Central	3.037	327.794	100.0	210,237	1.79	117,556	35.9	269,015
Illinois	732	93,070	100.0	59,271	63.7	33,798	36,3	76,170
Indiana	506	39,602	100.0	28,930	73.1	10,672	56.9	34,266
Michigan	165	65,441	100.0	42,874	65.5	22,567	34.5	54,158
Ohio	813	89,799	100.0	55,397	61.7	34,402	38.3	72,598
Wisconsin	495	39,883	100.0	23,766	9.45	16,117	40.4	31,825
West North Central	3,498	153,906	100.0	101,228	85.8	52,679	34.2	127,568
Iowa	548	25,839	100.0	17,133	66.3	8,706	33.7	51,486
Kansas	517	19,773	100.0	13,972	7.07	5,801	29.3	16,873
Minnesota	294	39,876	100.0	21,684	54.45	18,192	45.6	30,780
Missouri	530	42,035	100.0	31,383	74.7	10,653	25.3	36,710
Kebraska	447	13,257	100.0	8,408	63.4	4,848	36.6	10,832
North Dakota	059	6,300	100.0	3,911	62.1	2,389	37.9	5,106
South Dakota	412	6,028	100.0	757,3	5.69	2,091	30.6	5,783
South Atlantic	4,659	316,317	100.0	236,108	74.6	80,209	25.4	276,213
Delaware	34	6,137	100.0	4,054	1.99	2,084	34.0	2,096
Dist. of Columbia	296	11,351	100.0	8,971	79.0	2,381	21.0	10,162
Florida	835	94,592	100.0	70,718	74.8	23,873	25.2	82,655
Georgia	658	43,386	100.0	34,261	79.0	9,125	21.0	38,824
Haryland	240	38,170	100.0	860,55	65.8	13,072	34.2	31,634
North Carolina	670	47,602	100.0	37,449	78.7	10, 153	21.3	42,526
South Carolina	477	20,684	100.0	16,178	78.2	4,506	21.8	18,431
Virginia	472	42,519	100.0	30,288	71.2	12,230	28.8	36,403
Geer Vicatoria	244	11 874	100.0	0 001	76.6	2 784	23.4	10.483

Continued

Table 39.(cont.) Supply of registered nurse in each State and area according to whether employed on a full-time or part-time basis:

	Number	Estimated	ated	Estimated	pa pa	Estimated	Estimated	full-time
	in sample	Number	Percent	Number	Percent	Number	Percent	Equivalent
East South Central	2,052	101,002	100.0	79,768	79.0	21,234	21.0	90,385
ALabama	533	27,717	100.0	22,025	79.5	5,692	20.5	24,871
Kentucky	491	24,551	100.0	18,640	75.9	5,912	24.1	21,596
Mississipol	430	13,415	100.0	11,180	83.3	2,235	16.7	12,298
Tennessee	865	35,318	100.0	27,923	79.1	7,395	50.9	31,621
West South Central	2,114	148,017	100.0	119,415	50.7	28,601	19.3	133,716
Arkenses	380	14,001	100.0	11,347	81.0	2,654	19.0	12,674
Louislana	472	24,233	100.0	19,402	80.1	4,831	19.9	21,818
Oktahone	657	16,972	100.0	13,403	20.0	3,569	21.0	15, 188
Texas	803	92,810	100.0	75,263	1.19	17,547	18.9	84,037
Mountain	3,590	94,730	100.0	65,347	0.69	29,383	31.0	90,039
Arizona	202	27,093	100.0	20,303	74.9	6,790	25.1	23,698
Colorado	409	26,697	100.0	17,548	65.7	6,149	24.3	22, 123
Ideho	408	5,702	100.0	3,710	65.1	1,992	34.9	4,706
Montana	407	5,848	100.0	3,512	1.09	2,336	39.9	4,680
Nevada	365	7,134	100.0	5,510	77.2	1,624	22,8	6,322
New Mexico	405	9,393	100.0	6,685	71.2	2,708	38.8	8.039
Utah	523	9,831	100.0	6,017	51.5	3,814	38.8	7,924
Uyoning	368	3,032	100.0	2,062	68.0	070	32.0	2,547
Pacific	3,011	247,920	100,0	154,898	62.5	93,022	37.5	201,409
Alaska	325	3,583	100.0	2,283	63.7	1,300	36.3	2,933
California	1,208	173,973	100.0	112,933	6.49	61,040	35.1	143,453
Hawaii	411	76,755	100.0	5,597	45.9	2,077	27.1	6,636
Oregon	195	23,992	100.0	12,841	53.5	11,151	5.97	18,417
Usshington	009	38.698	100.0	235 25.5	0 9%	17 454	1.57	20 071

1/ Nurses working full-time plus one-half of nurses working part-time.

Table 40. Registered nurse population by activity status and geographic location: March 1992

	Total	in metropolitan statistical a	metropolitan statistical area	Not in metropolit statistical area	in metropolitan tistical area
Geographic area	number of nurses	Employed in nursing	Not employed in nursing		Not employed in nursing
Total	2,239,816	1,555,048	312,657	297,977	74,134
New England	163,198	106,788	26,086	24,072	6,252
Middle Atlantic	415,346	306,256	74,013	26,222	8,855
East North Central	400,313	274,355	55,300		17,219
West North Central	175,142	107,824	13,317	46,083	7,918
South Atlantic	384,681	257,953	52,857	58,364	15,507
East South Central	115,585	74,606	10,508	26,395	4,075
West South Central	177,039	127,259	24,484	20,758	4,538
Mountain	114,387	73,341	14,952	21,390	4,704
Pacific	294, 124	226,666	41,139	21,255	5,065

Table 41. Percent distribution of the registered nurse population in each geographic area, by racial/ethnic background: March 1992

Racial/ethnic background	United	New England	Middle	East North Central	West North Central	South	East South Central	South Central	Mountain	Pacific
Estimated RW population in arca	2,239,816	163,198	415,346	00,313	175,142	394,681	115,586	177,039	114,387	294,124
hite (non-hispanic)	1.06	7.96	86.4	96.3	2.96	98.9			93.4	1.23
Hack (non-hispanic)	4.0	1.2	5.5				6.7		1.1	3.1
sisn/Pacific Islander	3.4	1.1	5.2				0.8		1.2	9.5
Amerian Indian/Alaskan Native	0.4	0.3	0.5				0.3		6.0	7.0
ispanie	1.4	0.3	1.3				0.5		2.5	2.7
Not known	9.0	5.0	1.0	0.3	0.5	9.0	7.0	0.5	6.0	6.0

Table 42, Percent distribution of the registered nurse population in each geographic area by age group: March 1992

Age Graup	United	New England	Middle	East North Central	West North Central	South Atlantic	East South Central	West South Central	Mountain	Pacific
Estimated RN population in area	2,239,816	163,198	415,346	400,313	175,142	384,681	115,586	177,039	114,387	294,124
Less than 25 years	2.1	1.2	3.0	2.3	2.3	2.0	3.1	2.0	1.4	1.2
25-29	8.9	8.6	8.8	10.0	9.6	8.6	11.8	5.4	7.4	6.9
10-34	14.7	14.0	14.4	14.7	15.5	14.5	16.6	15.1	14.2	14.2
35-39	18,8	18.4	17.3	18.6	20.3	10.0	21.5	20.6	19.6	17.9
77-01	15.9	16.4	14.3	15.4	16.2	15.0	15.2	17.6	17.5	18.1
67-55	11.6	12.5	11.2	11.0	10.1	11.6	12.0	12.3	13.2	12.0
50-54	0.6	9.6	8.7	9.1	9.3	5.9	7.5	7.0	4.6	10.3
555-59	7.3	7.4	7.9	7.5	7.3	7.4	5.5	6.0	7.1	8.0
99-99	5.4	5.5	5.5	5.1	5.2	6.0	3.5	5.2	5.1	5.0
15 and over	5.6	5,8	7.8	5.8	3.4	5.8	3.0	4.9	5.5	6.4
Not known	0.7	9.0	1.0	0.6	0.8	0.7	0.5	0.6	9.0	0.7

Note: Percentage may not add to 100 because of rounding.

Table 43, Percent distribution of the registered nurse population in each geographic area, by highest nursing-related educational preparation:

Highest educational preparation	United	New England	Middle	East North Central	West North Central	South Atlantic	Esst South Central	Vest South Central	Hountain	Pacific
Estimated RN population in area	2,239,816	163,198	415,346	400,313	175,142	384,681	115,586	177,039	114,387	294,124
fplone	33.7	41.9	39.8	37.5	37.4	32.2	25.5		54.9	25.4
ssociate degree	28.3	18,9	25.2	27.0	27.0	31.8	37.6	32.5		32.2
acceleureste in nursing	27.3	26.2	26.0	25.1	7.92	25.6	27.2			31.6
Saccalaureate in related ffeld	2.6	3.0	- 12	3.0	2.7	2.1	1.7			2.8
laster's in nursing	5.3	4.9	5.8	5.2	4.0	5.5	5.7			5.0
(aster's in related field	2.2	2.9	5.6	1.6	0	2.3	1.6			2.6
octorate in nursing	2.0	0.3	0.1	0.2	0.1	0.2	0.2			0.1
Doctorate in related field	0.3	0.3	0.4	0.4	0.3	0.2	0.5			0.3
Not known	0.1	:	0.1	0.2	0.1	0.1	**			:

Note: Percentage may not add up to 100 because of rounding.

Table 44. Field of employment of registered nurses in each geographic area: March 1992

Field of employment	United	New England	Middle	East North Central	West North Central	South	East South Central	West South Central	Mountain	Pacific
Total	1,853,024	130,860	332,478	327,794	153,907	316,317	101,002	148,016	94,731	247,920
	1,232,717	196,08	215,594	217,227	102,096	211,149	69,215	102,371	63,748	170,356
Nursing home, extended care facility	128,983	14,009	26,748	27,238	15,462	18,480	4,341	4,306	960'9	12,302
Mursing education	36,514	2,237	5,441	7,642	3,213	2,999	3,383	3,274	1,739	3,587
community/public health setting	180,132	12,876	34,444	29,288	12,465	36,327	11,903	12,731	8,330	21,769
Student health service	50,606	5,150	14,868	5,682	3,634	5,675	1,572	6,452	2,221	5,353
Occupational health	19,266	2,016	2,927	2,574	1,674	4,067	920	1,540	1,043	2,505
Ambulatory care setting	144,110	9,802	21,752	28,468	10,420	24,828	6,619	11,217	8,208	22,795
Other	56,263	3,365	9,988	8,614	4,579	9,159	2,740	5,808	3,139	8,871
Not known	4, 433	277	717	1,061	364	632	308	318	206	382

Note: Number may not add up to total because of rounding.

Table 45. Average annual salary of full-time registered nurses in staff positions in each geographical area: March 1992

Area of employment	Number in sample	Estimated number	Annual salary
Total	11,421	770,621	\$35,212
New England	974	44,820	\$37,785
Middle Atlantic	1,086	140,137	\$37,225
East Worth Central	1,194	128,040	\$33,453
West Worth Central	1,423	62,376	\$31,510
South Atlantic	2,087	141,188	\$34,058
East South Central	988	49,003	\$32,227
West South Central	999	69,816	\$33,641
Mountain	1,506	41,048	\$32,551
Pacific	1,164	94,193	\$41,315

Note: Estimated number may not add to total because of rounding.

Appendix B

Survey Methodology

Five national sample surveys of registered nurses (RNs) have been carried out: September 1977; November 1980; November 1984; March 1988; and March 1992. These studies all utilized a design initially developed in 1975-76 under a contract the Division of Nursing, Bureau of Health Professions, Health Resources and Services Administration, had with Westat, Inc. In designing the approach, Westat, Inc., took into account the lack of single listing of all individuals who have licenses to practice in the United States and the fact that nurses may be licensed in more than one State at a time. The description of the survey methodology included here has been abstracted from a technical report of the adaption of the survey design to this current study prepared by Research Triangle Institute (RTI), the contractor for the 1992 study.

Sample Design

Because State-level estimates were desired, different sampling rates were set for the States based on considerations of the statistical precision of the estimates and the costs involved. States that had smaller numbers of RNs currently licensed were assigned higher sampling rates than were larger States, to yield a sample large enough to provide State estimates of reasonable precision. It was deemed too expensive to set sampling rates that would yield estimates of equal precision for all States while also achieving good precision for national estimates. Sample sizes and the precision of sample estimates thus typically were lower for smaller States than they were for larger States.

The use of differential State sampling rates substantially reduced variations in State sample sizes and thus permitted more precise State-level estimation than if a uniform sampling rate had been used. For example, States such as Wyoming and Alaska would have had samples of fewer than 200 RNs if a uniform sampling rate (near the overall sampling rate) had been employed across all States. The cost of this disproportionate sampling (i.e., using higher sampling rates in smaller States) was reduced precision of national estimates due to unequal weighting effects.

When the survey was originally designed, the State Boards of Nursing in the 50 States and in the District of Columbia (hereafter also referred to as a State) were determined to be the only sources for a sampling frame for the RN survey. Each

State's Board of Nursing maintains a file containing the name, address, and license number of every RN who is currently licensed in that State. These 51 files formed the basis of the sampling frame.

Approximately equal-sized alpha-segments were constructed by partitioning an alphabetically ordered list of all RN names nationwide into 250 segments with equal (or as nearly equal as possible) numbers of RNs. An alpha-segment consisted of all alphabetically adjacent names falling between set boundaries.

Registered nurses were in the sample on the basis of name, with an RN falling into the sample if her/his name of licensure fell within a specific portion of the alpha-segments included in the sample from her/his State. Specifically, the lower boundary of an alpha-segment was the name lowest in alphabetical order of all names included in that segment. The membership of the segment consisted of all names, beginning with the lower boundary, up to but not including a name that defined the upper boundary. (The latter name fell into the next alpha-segment.)

There was a planned variation in the size of the portions of segments used to accommodate the differing State sampling The largest portions used were full alpha-segments, rates. while other sizes were 1/2-, 1/4-, 1/8-, 1/16-, and 1/32portions. The fractions indicated the size of the specified alpha-segment portion relative to the size of the basic alpha-The sampling rate required for a given State was segment. achieved using a combination of these portions of alphasegments. Each State's sample consisted of 40 primary sampling units (portions of alpha-segments). Although each State had the same number (40) of sample segments (i.e., portions of alpha-segments), the segments differed in size depending on the State's sampling rate.

The fact that some RNs maintain active licenses to practice in more than one State complicated how selection probabilities were determined. An RN is represented on the licensure file of each State in which she/he has an active license at the time a sample is selected. To identify and account for such multiple licenses, the alpha-segment portions associated with larger States were "nested" (or included) within those associated with smaller States. Under this scheme, an RN who was licensed under the same name in two States with identical sampling rates was selected (or not selected) for both States, because the alpha-segments and portions of alpha-segments that defined sample membership were identical for both States. However, for two States that were sampled at different rates, the alphasegment portions for the lower sampling rate (the larger State) were nested within those of the higher sampling rate (the smaller State).

The nesting was based on how the 40 basic alpha-segment selections were used to define the sample for each State. Each of these alpha-segments, or one of the fractional portions of it, constituted one of the 40 sample clusters for each State. Accordingly, each of the basic alpha-segments had associated with it a 1/2-portion selection, a 1/4-portion selection from the selected 1/2-portion, a 1/8-portion selection from the 1/4-portion, a 1/16-portion selection from the selected selected 1/8-portion, and a 1/32-portion selected from the 1/16 portion. The sample 1/2-portion for a particular alpha-segment was selected at random and remained in the sample for all States for which half-portions were sampled from this alpha-Similarly, each of the smaller sample portions was segment. randomly selected from the halves of the next largest sample portion; e.g., a sample 1/8-portion was a randomly selected half of the corresponding sample 1/4-portion.

The sampling rate for a particular State was obtained from some combination of the alpha-segments and portions. For example, the 40 alpha-segments constituted the sample for States with a 16-percent sampling rate. (Because each segment contained an expected 0.4 percent of the State's RN names, taken together they contained an expected 40 x 0.4 percent, or 16 percent of those names.) The sample for a State with an 8-percent sampling rate consisted of the 40 1/2-portion selections. A 5-percent sampling rate was achieved by first randomly dividing the 40 alpha-segments into two groups, the first containing 30 alpha-segments and the other containing 10, and using the 1/4-portions from the first group and 1/2-portions from the second group $(0.4 \times [(30x1/4) + (10x1/2)] = 5)$.

The survey design specified, at the time of implementation, precisely which alpha-segments and portions would correspond to each of the different sampling rates used. This task resulted in the specification of 40 pairs of names for each of the sampling rates. Each pair consisted of the names defining the lower and upper boundary for one of the alpha-segments or alpha-segment portions corresponding to the sampling rate. Thus, the alpha-segment (portion) was defined by all names, beginning with its lower boundary, up to but not including its upper boundary.

To ensure that current information about RNs could be obtained, the survey design called for periodic implementation. A panel structure for the RN survey allowed for the systematic replacement of several of the sample alpha-segments in the periodic surveys. Under the design, the 40 sample alpha-

segments were randomly assigned to five panels of 8 alphasegments each. For each successive survey, a new panel (consisting of eight new alpha-segments) was entered into the sample, thus replacing one of the five panels that was in the previous survey. Under this scheme, a nurse whose name did not change could be retained in the sample for up to five surveys. The alpha-segments were reconstructed in the fourth survey (1988) and, therefore, exact correspondence of the current segments to those established initially may no longer exist.

Each of the 51 State Boards of Nursing provided one or more files that contained the names of currently licensed RNs. The files formed the basis of the sampling frame from which the RNs for that State were selected. The licensure files provided by the States were submitted on computer tape, on diskettes, or on a printed list. Essentially the same procedure was followed for sample selection for all States regardless of which form was submitted. Once a licensure file provided by a State was complete (i.e., contained all appropriate names of individuals with active RN licenses) and met all specifications, the required sample names in that file were selected.

The sample for a given State consisted of all RN names falling into any one of the State's designated 40 alphabetic portions (one portion from each of the 40 alpha-segments associated with the current sample). The sample alphabetic portions varied among States, depending on the State's sampling rate. The sample for a particular State was defined by the alphabetic portion boundaries, associated with its sampling rate. Regardless of the way a State alphabetized and standardized the names on its files, the sample names were selected according to the standards established by the survey design. That is, sample selections ignored blanks and punctuation in the last names (except a dash in hyphenated names) and ignored titles (e.g., "Sister").

Table B-1 shows the sampling rates and sample sizes that were planned and actually obtained for the 51 States in the survey. Both the sampling rate planned for each State and the actual sampling rate are shown. States are priority-ordered by frame size (smaller to larger) so that sampling rates are decreasing down the table.

The percentage difference shows the State-specific variation caused by the nurse names in each State. The percentage difference averaged less than 0.50 percent over the full sample. The State frame sizes shown in Table B-1 were adjusted to account for ineligible licenses (i.e., frame errors) found in the sample. The ineligible licenses were identified in the process of reconciling the State and nurse reported licenses.

Table 8-1 State Sampling Rates and Sample Sizes (Priority-Ordered)

State	Frame ^{1/} Size	Sampling Planned	Rate ^{2/} Actual	Actual Sample Size
Total	2,579,208			45,130
Wyoming	4,274	16.0	14.7	629
Alaska	5,128	12.0	12.0	616
North Dakota	6,853	9.0	8.1	557
Vermont	7,212	9.0	8.9	641
South Dakota	8,306	8.0	7.8	644
1daho	8,705	8.0	8.3	723
Nevada	9,139	8.0	7.6	695
Montana	9,154	8.0	7.8	709
Delaware	9,528	7.0	7.4	709
Have I I	10,986	7.0	7.0	768
New Mexico	11,250	6.0	5.8	657
Utah	12,458	6.0	6.5	805
Maine	14,472	5.0	5.3	773
Rhode Island	14,544	5.0	5.4	792
New Hampshire	15,556	5.0	5.2	816
Nebraska	17,095	4.0	4.0	688
District of Columbia	17,173	4.0	3.9	673
Mississippi	18,075	4.0	4.1	749
West Virginia	18,643	4.0	3.9	725
Arkansas	20,841	3.5	3.5	736
Ok Lahona	23,748	3.5	3.5	841
Kansas	25,457	3.0	3.2	808
South Carolina	27,098	3.0	2.9	787
Oregan	30,846	2.5	2.3	706
Kentucky	31,048	2.5	2.5	774
Louisiana	31,416	2.5	2.4	766
Iowa	32,090	2.5	2.4	774
Alabama	34,189	2.5	2.4	834
Colorado	35,359	2.5	2.6	915
Arizona	35,835	2.5	2.3	811
Tennessee	46,480	1.8	1.9	874
Minnesota	49,096	1.8	1.7	818
Connecticut	49,318	1.8	1.7	826
Washington	49,688	1.8	1.7	831
Maryland	52,215	1.5	1.6	842
Wisconsin	55,551	1.5	1.4	758
Missouri	55,884	1.5	1.5	836
Georgia	57,514	1.5	1.8	1,041
Indiana	58,102	1.5	1.5	887
Worth Carolina	60,274	1.5	1.7	993
Virginia	65,480	1.25	1.2	786
Massachusetts	96,497	1.00	0.93	921
Michigan	102,554	1.00	0.93	950
New Jersey	102,236	1.00	1.00	1,036
Ohio	121,788	1.00	1.02	1,245
Illinois	123,472	1.00	1.00	1,229
Texas	124,410	1.00	0.98	1,220
Florida	127,919	1.00	0.99	1,264
Pennsylvania	183,004	0.90	0.89	1,629
California	223,463	0.90	0.86	1,927
New York	227,785	0.90	0.92	2,096

^{1/} Adjusted frame size

^{2/} Since the actual distribution of names differs for each State from the distribution derived from the merged States used for the development of the 250 alpha-segments some variation occurs between the planned and actual sampling rate.

Cases that could not be reconciled by RTI were sent to the State Boards of Nursing for resolution. Based on the States' responses, some nurses were found to have been incorrectly included in the sample frame; that is, they were not licensed to practice as an RN at the time of frame construction.

An adjustment to the State frame size was made by computing an estimated number of ineligibles in the State based on the proportion of verified ineligibles in the sample, and subtracting this estimated number from the original frame total. This adjustment results in frame sizes more closely reflecting the population numbers of eligible nurses and thus improves the accuracy of all survey estimates. Priority changed only for the States of New Jersey and Michigan and both States had the same sampling rate. Therefore, the sample alpha-segments were the same for the States involved.

Some RNs who had more than one active license were selected more than once. Steps were taken, in accordance with the sample design, to ensure that each sampled RN was retained in the national sample exactly once to avoid multiple questionnaires being sent to nurses. Specifically, after all State samples were selected, they were combined on computer into a single national sample file. This file, referred to as the master file, was sorted by last name, ZIP code, address, and first name. A complete listing of the file was printed out and reviewed visually. Special attention was paid to all groups of names that sorted together. Two names were taken to represent the same individual if entire names appeared to be the same and addresses were the same. Allowances were made for obvious unimportant differences between representations of the same name and/or address. When there was any doubt, both names were retained in the sample and questionnaires were mailed to both addresses.

Statistical Techniques

A. Weighting

The probability sample design for the Fifth National Sample Survey of Registered Nurses, (RN V) permits the computation of unbiased estimates of characteristics of the target population. These estimates are based on weights that reflect the complex design and compensate for the potential risk of nonresponse bias to the extent feasible. The weights that are assigned to each sample nurse may be interpreted as the number of nurses in the target population that the sample nurse represents. The weight for an RN is the reciprocal of the nurse's probability of selection, adjusted to account for nonresponding nurses and for multiple licenses.

A nurse is uniquely linked on the national sampling frame with his/her "priority State," i.e., the State with the lowest number of currently licensed RNs in which she or he was licensed. All nurses with the same priority State had an equal probability of being selected within that State and, consequently, all sampled nurses with that priority State had equal weights. The sum of the weights for all respondents assigned a specific priority State equals, approximately, the total number of active licenses in the State at the time the sample was drawn less the number of those licenses assigned to higher priority States.

The weights were computed sequentially for States A, B, etc., where A was the highest-priority State, and B the next highest State. The weight for State A was the ratio of the count of licenses in the sampling frame for State A to the number of respondents licensed in State A. For State B, and the remaining States, the numerator and denominator of this ratio were adjusted to account for State A and other higher-priority States. To describe the basic method, the following terms are defined:

- N(i) = total number of licenses for State i
- m(i) = number of respondents for State i that did not have a license in higher-priority State
- n(i,j) = number of respondents with a license in both State i and State j (note n(i,i) denotes the number of eligible respondents with a license only in State i)
 - W(i) = the adjusted weight for eligible respondents who were assigned to the priority State i.

The weight for State A was computed as follows: W(A) = N(A) / m(A).

For State B weight, W(B), the numerator was the total frame count of RNs licensed in State B, N(B), after removal of the estimated total count of State B nurses who were also licensed in State A (i.e., W(A)n(A,B)). Similarly, the numerator of W(C) excluded State C nurses who were also licensed in either State A or State B (i.e., W(A)n(A,C) + W(B)n(B,C)). That is, for the State B weight and the State C weight, the computations were:

$$W(B) = [N(B) - W(A) n(A,B)] / m(B)$$

$$W(C) = [N(C) - W(A) n(A,C) - W(B) n(B,C)] / m(C)$$
.

In either case, the denominator was the number (m(B) or m(C)) of respondents in the State not licensed in a higher-priority State.

In general, the numerator of a State I weight, W(I), was the total frame count licensed in State I after removal of the estimated total count of State I nurses also licensed in higher-priority States. The denominator, m(I), was the number of State I respondents not licensed in a higher-priority State. This weighing scheme incorporated a nonresponse adjustment that inflated the respondents' data to represent the entire universe.

B. Estimation Procedures

State-level estimates can be computed using the final set of sampling weights, W_k (for sample nurse-k). For example, an estimate of the total number of RNs working in Iowa may be based on the following indicator variable X_k :

X_k = 1 if nurse-k worked in Iowa, = 0 otherwise.

The desired estimated total may then be written as

$$\hat{x} = \sum_{k} w_{k} x_{k} ,$$

the sum being over all sample nurses.

Estimates of ratios and averages are obtained as the ratio of estimated totals.

C. Sampling Errors

To the extent that samples are sufficiently large, relatively precise estimates of characteristics of the licensed RN population of the United States can be made because of the underlying probability structure of the sample data. Such estimates are, sometimes, an imperfect approximation of the truth. Several sources of error could cause sample estimates to differ from the corresponding true population value. These sources of error are commonly classified into two major categories: sampling errors and nonsampling errors.

A probability sample such as the one used in this study is designed so that estimates of the magnitude of the sampling error can be computed from the sample data. Nonsystematic components of nonsampling error will also be reflected in the sampling error estimates.

Some sources of error--such as unusable response to vague or sensitive questions, no response from some nurses, and errors in coding, scoring, and processing the data--are, to a considerable extent, beyond the control of the sampling statistician. They are called "nonsampling errors" and also occur in cases where there is a complete enumeration of a target population, such as the U.S. Census. Among the activities that were directed at reducing nonsampling errors to the lowest level feasible for the current survey were careful planning, keeping nonresponses to the lowest feasible level, and coding and processing the sample data carefully.

Nonresponse to the survey is one source of nonsampling error because a characteristic being estimated may differ, on average, between respondents and nonrespondents. It is for this reason that considerable effort is expended to obtain a high response rate through such actions as respondent motivation and followup procedures. A high response rate will reduce both random and systematic errors.

Sample survey results are subject to sampling error. The magnitude of the sampling error for an estimate, as indicated by measures of variability such as its variance or its standard error (the square root of its variance), provides a basis for judging the precision of the sample estimates.

Systematic sampling, which was the selection procedure used in choosing the alpha-segments for this study, is very convenient from certain practical points of view, including providing for panel rotation. However, it does not permit unbiased estimation of the variability of survey estimates unless some assumptions are made. Estimates of standard errors are made based upon the assumption that RTI's systematic sample of 40 alpha-segments is equivalent to selecting a stratified random sample of two alpha-segments from each of 20 strata of adjacent alpha-segments. Ordinarily, this assumption should lead to overestimates of the sampling error for systematic sampling, but in this case (with alpha-segments as the sampling units) RTI believes the magnitude of the overestimate is trivial.

Regarding the sample as consisting of 20 pairs of alpha segments (thus obtaining 19 degrees of freedom) for the purpose of variance estimation, the probability will be approximately 0.95 that the statistic of interest differs from the value of the population characteristic that it estimates by not more than 2.093 standard deviations. Specifically, a 95 percent confidence interval for an estimated statistic \hat{x} takes the form

$$\hat{x} \pm 2.093 \hat{\sigma}_{\hat{x}}$$
,

where $\hat{\sigma}_{\hat{x}}$ is the estimated standard error of \hat{x} . Inferences involving a small number of respondents (where, for example, 25 is considered a small number) have estimated standard errors of $\hat{\sigma}_{\hat{x}}$ that themselves are subject to high variability. Thus, inferences based on such estimates should be guarded.

Direct Variance Estimation

The direct computation of the sampling variance used the jackknife variance estimation procedure with 20 replicates of the sample. Each replicate was based on 19 pairs of alphasegments and one alpha-segment from the 20th pair. The actual respondent count in the included segments for a particular replicate constituted a sample of approximately 39/40ths of the full respondent sample, and were weighted to represent the full population.

Variance estimates using the jackknife approach require the computation of a set of weights for the full sample and a set for each replicate using the established weight computation procedure (i.e., 20 additional sets of weights). For the replicates, the weights were based on the responding nurses from the 39 segments associated with each replicate. The 20 sets of weights permits the construction of 20 replicate estimates to compare with the estimate produced from all of the data; each replicate estimate will be based on about 39/40ths of the data.

The variance estimate is computed using the following procedure. Define the following,

 \hat{X}_{i} = an estimated total for replicate i associated with alpha-segment pair i;

 \hat{x}_i = an estimated total obtained over the full sample. The variance of \hat{x} , $Var(\hat{x})$, is estimated by computing

$$Var(\hat{x}) = \sum_{i=1}^{20} (\hat{x}_i - \hat{x})^2$$
.

If the estimate of interest is a ratio of two estimated totals (e.g., the proportion of RNs resident in Florida between 25 and 29 years old), the variance estimate for the estimated ratio would be of the following form:

$$Var\left(\frac{\hat{x}}{\hat{y}}\right) = \sum_{i=1}^{20} \left(\frac{\hat{x}_i}{\hat{y}_i} - \frac{\hat{x}}{\hat{y}}\right)^2$$

Following the example, the \hat{x} and \hat{x}_i measurements would be full sample and replicate estimates, respectively, of the total number of RNs resident in Florida who were 25 to 29 years old while \hat{y} and \hat{y}_i would be the corresponding estimates of the total number of RNs resident in Florida. The variance of any other statistic, simple or complex, can be similarly estimated by computing the statistic for each replicate.

The jackknife variance estimator can use either the full sample estimate, \hat{x} , or the average of the replicate estimates, x_i . While usually little difference exists between the two estimates, RTI used the estimator \hat{x} , which tends to provide more conservative estimates of variance.

Direct estimates of the variance were computed for a variety of variables. These variables were chosen not only due to their importance, but also to represent the range of expected design effects. The average of these design effects (on a State-by-State basis) provides the basis for the variance estimate for variables not included in the set for which direct variance estimates were computed. Direct estimates of the standard error (the square root of the variance) are presented for a selected set of national estimates in Table B-2. Table B-3 shows the estimated State population of nurses, and the standard error of these population totals.

2. Design Effects and Generalized Variances

The generalized variance is a model-based approximation to the sampling variance estimate, which is less computationally complex than the direct variance estimator but is also less accurate. The generalized variance equations use the national-level or State-level estimates of the design effect and, for some estimates, the coefficient of variation (CV) to estimate the sampling variance. The design effect, F, for an estimated proportion \hat{p} is determined by taking the ratio of the estimated sampling variance, $\hat{\sigma}_p^2$, obtained by the jackknife method, to the sampling variance of the \hat{p} simple random sample

Table B-2, Standard errors(S.E.) of selected statistics(number and percentage) for U.S. registered nurse population

Description	Estimated Number	S.E. of estimated Number	Estimated percent	S.E. of estimated percent
Total RM population	2,239,816	5,554	**	(44)
Basic Wursing Education				
Diploma	951,101	7,679	42.46	0.35
Associate Degree	729,550	11,847	32.55	0.51
Baccalaureate Degree	554,902	7,599	24.77	0.34
Master's degree	2,581	426	0.12	0.02
Doctorate	171	135	0.01	0.01
Not known	2,010	432	0.09	0.02
Employment Status				
Employed in nursing	1,853,024	10,862	82.73	0.38
Not employed in nursing	386,791	8,392	17.27	0.38
Racial/Ethnic Background				
Hispanic	30,441	5,335	1.36	0.24
American Indian/Alaskan	5.00			
native	9,998	1,356	0.45	0.06
Asian/Pacific Islander	75,785	17,554	3.38	0.78
Black	90,611	8,699	4.05	0.39
White	2,018,456	19,439	90.12	0.91
Not known	14,526	1,355	0.65	0.06
Employment setting				
Hospital	1,232,717	12,037	66.53	0.48
Nursing Home Ext. Care	128,983	3,173	6.96	0.14
Nursing Education	36,514	2,023	1.97	0.09
Public/Community Health	180,132	3,948	9.72	0.18
Student Wealth	50,606	2,753	2.73	0.12
Occupational Health	19,266	1,263	1.06	0.06
Ambulatory care setting		1,000		0.00
(Non-Nurse)	138,290	4,289	7.46	0.19
(Nurse)	5,820	955	0.31	0.04
Other	56,253	2,291	3.04	0.10
Not known	4,433	607	0.24	0.03
	4,-33		0.64	0.00
Type of position Administrator or Assistant				
Administrator	114,419	3,101	6.19	0.14
Consultant	16,771	1,299	0.91	0.06
Supervisor	92,080	2,566	4.97	0.11
Instructor	64,349	2,923	3.47	0.13
Head Nurse of Assistant	84,726	3,635	4.57	0.16
Staff or Gen. Duty	1,233,537	13,066	66.57	0.55
Practitioner/Midwife	26,704	1,331	1.44	0.06
Clinical Specialist	35,524	1,682	1.92	0.08
Nurse Clinician	24,824	1,497	1.34	0.07
Certified Registered Wurse	2-,024	1,775	1.00	4.47
Anesthetist	18,617	1,305	1.01	0.06
Research	7,830	858	0.42	0.04
Private Duty	11,651	1,263	0.63	0.06
Other	120,024	4,418	6.48	0.19
utner				

Table B-2. (cont.) Standard errors (S.E.) of selected statistics (number and percentage) for U.S. registered nurse population

Description	Estimated Number	S.E. of estimated Number	Estimated percent	S.E. of estimated percent
Highest Wursing Education				
Diplome	754,848	7,084	33.70	0.32
Associate Degree	632,483	10,760	28.24	0.47
Baccalaureate	671,400	8,353	29.98	0.36
Master's	168,009	3,353	7.50	0.15
Doctorate	11,285	1,004	0.50	0.04
Not known	1,792	432	0.08	0.02
Age of Nurses				
Less than 25 yrs of Age	47,625	2,452	2.13	0.11
25 to 29 Years of Age	198,405	3,595	8.86	0.17
30 to 34 Years of Age	328,190	6,555	14.65	0.29
35 to 39 Years of Age	421,553	5,537	18.82	0.24
40 to 44 Years of Age	355,799	5,762	15.89	0.25
45 to 49 Years of Age	259,093	5,019	11.57	0.22
50 to 54 Years of Age	202,111	4,016	9.02	0.18
55 to 59 Years of Age	164,273	5,908	7.33	0.26
60 to 64 Years of Age	120,687	3,811	5.39	0.17
65 to More Years of Age	126,476	4,234	5.65	0.19
Nat known	15,603	1,216	0.70	0.05

Table 8-3 Direct Estimates of State Wurse Population, Standard Error, and Coefficient of Variation by State, 1992

State	1992 Estimated State Murse Population	Standard Error	Coefficient of Variation (in Percent)
United States	2,239,816	5,554	0.25
Alabama	31,908	494	1,55
Ataska	4,153	121	2.92
Arizona	32,988	674	2.04
Arkansas	17,059	426	2.50
California	207,563	1,650	0.79
Colorado	31,948	459	1.44
Connecticut	41,239	912	2.21
Delaware	7,463	339	4.55
District of Columbia	11,812	513	4.34
Florida	119,405	1,692	1.42
Georgia	51,412	741	1.44
Hawa (1	9,222	267	2.90
Idaho	7,287	226	3.10
Illinois	110,762	1,692	1,53
Indiana	49,153	833	1.69
Lova	29,743	399	1.34
Kansas	22,301	417	1.87
Kentucky	28,154	656	2.33
Louisiana	28,169	461	1.64
Maine	12,731	287	2.25
Maryland	43,823	1,229	2.80
Massachusetts	78,322	1,281	1,64
Michigan	85,544	1,401	1,64
Minnesota	45,681	479	1.05
Mississippi	15,334	360	2.35
Missouri	48,167	940	1,95
Montana	7,370	141	1.91
Nebraska	14,829	374	2.52
Nevada	8,943	475	5.32
New Hampshire	13,036	495	3.80
New Jersey	82,555	1,569	1.90
New Mexico	11,121	320	2.88
New York	189,342	2,280	1.20
North Carolina	56,943	733	1,29
North Dakota	6,718	134	2.00
Ohio	107,950	1,376	1.28
Oklahoma	20,032	528	2.64
Oregon	26,561	506	1.90
Pennsylvania	143,449	2,528	1.76
Rhode Island	11,564	282	2.44
South Carolina	24,265	650	2.68
South Dakota	7,704	265	3,44
Tennessee	40,188	615	1.53
Texas	111,778	1,073	0.96
Utah	11,195	193	1.73
Vermont	6,307	391	6.20
Virginia	54,958	924	1.68
Washington	46,626	693	1.49
West Virginia	14,600	612	4.19
Visconsin	46,905	855	1.82
Wyoming	3,536	105	2.98

of the same size. For the percentage p, this is given by

$$F = n \hat{\sigma}_{p}^{2} / [\hat{p} (1-\hat{p})]$$
,

where n is the unweighted number of respondents used to determine the denominator of \hat{p} .

Direct estimates of the design effect were computed for a set of variables for each State. The averages of the design effects were then computed for each State and the nation. These average design effects can be used in formulas for estimating generalized variances or standard errors. This procedure uses average design effects for a class of estimates instead of calculating direct estimates (with a resulting economy in time and costs), at the sacrifice generally of some accuracy in the variance estimates.

The standard error for an estimated proportion, $\hat{p} = \hat{Y}/\hat{X}$, for a State or for the United States, is provided by the equation:

$$\sigma_{\hat{Y}/\hat{X}} = \sqrt{\mathbf{F} \cdot (\hat{Y}/\hat{X}) \cdot (1-\hat{Y}/\hat{X})/\mathbf{n}}$$
(1)

where n is the number of survey respondents used to determine the estimate \hat{X} . The multiplier F, the average design effect, depends upon the State for which the estimated proportion was generated. Table B-4 contains the list of average design effects for the United States and each State.

Generalized estimates of standard errors can also be computed for estimated numbers (or totals) of RNs in a State, \hat{Y} , with a particular characteristic. The estimate \hat{Y} is a subtotal of the estimate \hat{X} , the estimated total of RNs working and/or living in the State. The standard error and coefficient of variation of \hat{X} (represented by C.V. \hat{x}) were determined for the nation and each State (see Table B-3). The following exposition is made simpler by defining the rel-variance of an estimate as the square of its coefficient of variation.

Then the rel-variance of the ratio of \hat{Y} to \hat{X} (called $V_{Y/\hat{X}}^2$) can be calculated as:

$$V_{Y/X}^2 = \frac{F(1-\hat{Y}/\hat{X})}{n(\hat{Y}/\hat{X})},$$

Table B-4 Average Design Effects for Percentages Estimated from the Fifth National Sample Survey of Registered Nurses, 1992

State	Average Design Effec
United States	1.91
ALabama	1.06
Alaska	1.03
Arizona	1,12
Arkansas	1.13
California	1,13
Colorado	1,10
Connecticut	1.24
Delaware	1.40
District of Columbia	1.15
Florida	1.15
Georgia	1.02
Hawaii	1.35
Idaho	1,21
Illinois	0.98
Indiana	1,01
10wa	1,06
Kansas	1,06
Kentucky	1.02
Louisiana	1.07
Maine	1.06
Maryland	1.07
Massachusetts	1, 15
Michigan	1,02
Hinnesota	0.99
Mississippi	1.17
Missouri	1.06
Montana	0.96
Webraska	1.03
Wevada	1,71
New Hampshire	1,18
	1.06
New Jersey New Mexico	1.28
New York	1.14
Worth Carolina	1.05
Worth Dakota	1,20
Ohio	1.01
	1.07
Oklahona	0.97
Oregon	1.20
Pennsylvania	0.97
Rhode Island South Carolina	1.05
	1.52
South Dakota	1.08
Tennessee	
Texas	1.11
Utah	
Versiont	1.59
Virginia	1.09
Washington	1.25
West Virginia	1.23
Wisconsin	1.16
Wyoming	1.07

where F is the design effect for the State of interest and n is the number of respondents to the survey (i.e., the number in the sample that were weighted to obtain the estimate \hat{X}).

Then we can approximate the rel-variance of \hat{Y} , denoted $V_{\hat{Y}}^2$, using

$$V_{Y}^{\frac{7}{2}} = V_{Y/X}^{\frac{7}{2}} + (C.V._{X})^{2}$$
.

Finally, the variance of \hat{Y} can be estimated by multiplying by the rel-variance above, V_Y^2 . The standard error of \hat{Y} , $\sigma_{\hat{Y}}$, is thus estimated as

$$\sigma_{\vec{Y}} = \hat{Y} \sqrt{\hat{Y}_{\vec{Y}}^2} . \qquad (2)$$

The standard error of an estimated percentage for a region of the United States depends upon a linear combination of the variance of the same estimated percentages for the States comprising that particular region. The estimated proportion (or percentage) for the region is

$$\hat{Y}_{R}/\hat{X}_{R} = \frac{\sum_{n=1}^{h} \hat{Y}_{n}}{\sum_{n=1}^{h} \hat{X}_{n}}$$
.

where h is the number of States in region (R), and \hat{Y}_s and \hat{X}_s are estimates for a particular State. The formula used to approximate the standard error of an estimated proportion for a region is

$$\sigma_{\hat{X}_{R}/\hat{X}_{R}} = \sqrt{\sum_{s=1}^{h} (\hat{X}_{s}^{2} \sigma_{\hat{Y}_{s}}^{2}/\hat{X}_{s}) / (\sum_{s=1}^{h} \hat{X}_{s})^{2}}$$
(3)

where $\sigma_{\hat{Y}_a/\hat{X}_a}$ represents the standard error of the estimated proportion \hat{Y}_a/\hat{X}_a for the States and the standard errors are estimated from equation (1) or from direct estimation.

The direct standard error for an estimated number for a region of the United States also depends upon a linear combination of the variance of the same estimated numbers for the States which comprise the region. The formula used is

$$\sigma_{\tilde{Y}_R} = \sqrt{\sum_{s=1}^h \sigma_{\tilde{Y}_s}^2}$$
(4)

where the standard error $(\sigma_{\hat{Y}_g})$ of the estimated number \hat{Y}_s is available either from the direct procedures or from formula (2).

Illustrative examples of the computation of the generalized variance are given in Chart B-1.

Chart B-1 Illustrative Examples of Generalized Variance Estimates

- Estimated Percentages (or proportions) for a State or the United States
 - a) Percent of nurses located in New York who were employed in nursing on a full-time basis:

$$p = 60.2$$
 $F = 1.14$ $n = 1,409$

$$\hat{\sigma} = [1.14 (.602)(.398)/1409]^{1/2} = .014 \text{ or } 1.4\%$$

b) Percent of employed nurses in the United States who were working in hospitals:

$$p = 66.5 F = 1.91 n = 27,336$$

$$\hat{\sigma} = [1.91 (.665) (.335) / 27,336]^{1/2} = .0039 \text{ or } .39\%$$

- 2. Estimated number for a State or the United States
 - a) Estimated number of nurses located in New York State who were not employed in nursing:

$$\hat{Y} = 30,045$$
 $\hat{X} = 189,342$ $\hat{Y}/\hat{X} = .159$ $n = 1,409$ C.V. = 1.20%

$$F = 1.14$$

$$\hat{V}_{Y}^{2} = [(1.14)(.841)/1409(.159)] + (.0120)^{2} = .0044$$

$$\sigma_{\tilde{Y}} = 30,045 \ (.0044)^{1/2} = 1,998$$

b) Estimated number of nurses located in United States who were employed in nursing:

$$\hat{Y} = 1,853,024$$
 X = 2,340,816 n = 32,304

C.V.
$$\hat{r} = .0025 \quad \hat{Y}/\hat{X} = .827 \quad F = 1.91$$

$$\hat{\nabla}_{v}^{2} = [(1.91)(.173)/32,304(.827)] + (.0025)^{2} = .0000186$$

$$\sigma_{\hat{Y}} = 1,853,024 (.0000186)^{1/2} = 7,996$$

Chart B-1 (cont.) Illustrative Examples of Generalized Variance Estimates

3. Standard error of a regional estimate (or a grouping of States)
Estimated percent of nurses employed in nursing in the Middle Atlantic region:

Y/X = 80.0%

New Jersey:

$$\sigma_{\text{VX}} = [1.06(.7815)(.2185)/673]^{1/2} = .016 \text{ or } 1.6\%$$

New York:

$$\sigma_{YX} = [1.14(.8413)(.1587)/1409]^{1/2} = .010 \text{ or } 1.0$$

Pennsylvania:

$$\sigma_{YX} = [1.20(.7575)(.2425)/1164]^{1/2} = .014 \text{ or } 1.4\%$$

Middle Atlantic Region:

$$\sigma_{\text{Y/X}} = \{[(82,555)^2(.016)^2 + (189,342)^2(.010)^2 + (143,449)^2 \\ (.014)^2]/(82,555 + 189,342 + 143,449)^2\}^{1/2} = .0074 \text{ or } .74\%$$

Appendix C Questionnaire

OMB No. 0915-0153 Expiration Date: September 30, 1992



NATIONAL SAMPLE SURVEY OF REGISTERED NURSES



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Health Resources and Services Administration Rockville MD 20857

Dear Colleague:

We are writing to request your participation in an important study of the nurse population in the United States. This survey is being conducted for the Division of Nursing, Bureau of Health Professions, Health Resources and Services Administration, Public Health Service, U.S. Department of Health and Human Services by the Research Triangle Institute. The information is for statistical purposes only and will not be connected with your name. Individually identifiable information will be used for sample definition and for preventing data duplication. Once this process is completed, individual identifiers will be destroyed. Participation is voluntary, and there are no penalties for failure to answer any question; however, each unanswered question substantially reduces the accuracy of the data.

This study is being carried out to assist in fulfilling congressional requirements stated in Section 951 of P.L. 94-63 (42 USC 296 note), which specifies that information be obtained, on a continuing basis, on the number and distribution of nurses; and in Section 708 of Title VII of the Public Health Service Act (42 USC 292h) which requires collection systems and analytical studies on the supply of registered nurses and other health professionals. These public laws require the preparation and submission of reports to Congress. In addition, these data are a primary resource throughout the health care arena as studies are made assessing the number and characteristics of the registered nurse supply.

The questionnaire has been divided into five sections. These sections are designed to gather information on (a) your educational background as a registered nurse, (b) your employment status in nursing, (c) your employment status if you are not currently employed in nursing, (d) prior nursing employment status, and (e) general information.

Please read and follow all instructions carefully and answer all questions unless otherwise instructed. It should take about 20 minutes of your time to complete. Return the completed questionnaire in the postage-paid envelope enclosed in this package at your earliest convenience. All RNs who have received the questionnaire are requested to complete it regardless of their retirement or working status. If possible, we suggest you complete it now.

Thank you for your cooperation. Your efforts are greatly appreciated.

Sincerely,

Marla E. Salmon, ScD, RN, FAAN

Director, Division of Nursing

NATIONAL SAMPLE SURVEY OF REGISTERED NURSES

Instructions

Everyone receiving this questionnaire is requested to complete it. This includes persons who are:

- Retired
- Not presently working
- Employed but not as an RN
- Employed as an RN

If you receive more than one questionnaire, please complete only one copy and return it and all extra copies of the questionnaire to the Research Triangle Institute. Do not give extra questionnaires to another nurse to complete.

Please read and carefully follow all instructions and answer all questions unless otherwise instructed.

Many questions request you to "Circle only one number." Please circle the number in front of the correct response and not the response.

EXAMPLE:

The correct way to answer a question is to (Circle only one number):

- 1.) Circle the number in front of the response.
- Circle the response.

Please return your completed questionnaire in the enclosed postage-paid envelope at your earliest convenience.

PUBLIC BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to PHS Reports Clearance Officer; ATTN: PRA; Hubert H. Humphrey Bldg., Room 721-B; 200 Independence Ave., SW; Washington, DC 20201, and to the Office of Management and Budget; Paperwork Reduction Project (0915-0153); Washington, DC 20503.

SECTION A: EDUCATION

CIRCLE THE APPROPRIATE NUMBER CORRESPONDING TO YOUR ANSWER IN EACH QUESTION OR SUPPLY REQUESTED INFORMATION

- In what type of basic nursing education program were you prepared to become a registered nurse? (Circle only one number)
 - 1. Diploma
 - 2. Associate Degree
 - 3. Baccalaureate Degree
 - 4. Master's Degree
 - 5. Doctorate (N.D.)
- 1b. In what month and year did you graduate from this program?

Month	Year

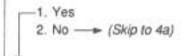
1c. In which State or foreign country was this basic nursing education program located?



2a. IMMEDIATELY PRIOR TO STARTING THE BASIC NURSING EDUCATION PROGRAM described in Question 1, were you employed in a health occupation?

- 2b. Were you a (Circle only one number)
 - Nursing Aide
 - Licensed Practical/Vocational Nurse
 - 3. Other (Specify)

- 3a. BEFORE STARTING THE BASIC NURSING EDUCATION PROGRAM described in Question 1, were you ever licensed to practice as a licensed practical or vocational nurse?
 - 1. Yes
 - 2. No
- 3b. BEFORE STARTING THE BASIC NURSING EDUCATION PROGRAM described in Question 1, did you receive a degree from <u>any other</u> formal post-secondary education program?



- 3c. What was the highest degree you received before starting your basic nursing education program? (Circle only one number)
 - 1. Associate Degree
 - Baccalaureate Degree
 - 3. Master's Degree
 - 4. Doctoral Degree
- 3d. Was this degree in a health-related field?
 - Yes → (Skip to 4a)
 - -2. No
- 3e. What was your major field of study? (Circle only one number)
 - 1. Biological or Physical Science
 - Business or Management
 - 3. Education
 - 4. Liberal Arts
 - 5. Social Science
 - 6. Other (Specify)_____

4a.	SINCE GRADUATING FROM THE BASIC NURSING EDUCATION PROGRAM YOU DESCRIBED IN
	QUESTION 1, have you earned any additional degrees?

г	-1.	Yes			
l	2.	No -	→ (Skip	to	6
Ι					

4b. For each academic degree you have received since graduation from your basic nursing education program, please indicate (i) the type of degree; (ii) whether or not the degree is related to your nursing career; and (iii) the year the degree was received.

	(i)	(ii))	(iii)
	Related to nursing career Received (CIRCLE Y OR N) (CHECK ALL		Year in which you received the degree	
Type of Degree	THAT APPLY)	YES	NO	the degree
Associate degree in nursing	1 🔲			19
Associate degree in another field	2	Υ	N	19
Baccalaureate in nursing	3 📙			19
Baccalaureate in another field	4 📙	Y	N	19
Master's in nursing	5 🔲			19
Master's in another field	6	Y	N	19
Doctorate in nursing	7 🔲			19
Doctorate in another field	8	Y	N	19

IF YOU HAVE LISTED A MASTER'S OR DOCTORAL DEGREE IN QUESTION 4b, CONTINUE WITH QUESTION 5, OTHERWISE SKIP TO QUESTION 6.

5.	What was the one primary focus of your master's and/or doctoral degree(s)? (Circle only one number
	for each relevant degree)

5a. Master's

- Clinical Practice
- 2. Education
- 3. Supervision/Administration
- 4. Other (Specify) _____

5b. Doctoral

- 1. Clinical Practice
- 2. Education
- 3. Supervision/Administration
- 4. Research
- 5. Other (Specify)

6. SINCE GRADUATING FROM THE BASIC NURSING EDUCATION PROGRAM you described in Question 1, have you completed a formal educational program preparing you for advanced practice as a clinical nurse specialist, nurse anesthetist, nurse-midwife, or nurse practitioner?

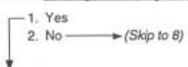
	-1.	Yes	
	-1. 2.	No -	→ (Skip to 7)
J			

- What type of formal educational program? (Circle appropriate number)
 - 1. Clinical Nurse Specialist
 - 2. Nurse Anesthetist
 - Nurse-Midwife
 - 4. Nurse Practitioner
- 6b. What was the length in months of this program?
 - 1. Less than 3 months
 - 2. 3 through 8 months
 - 3. 9 months or more
- When you completed the program, did you receive a: (Circle appropriate number)
 - 1. Certificate
 - Master's Degree
 - 3. Other (Specify)
- 6d. What was the type of specialty studied in this program? (Circle appropriate number)
 - Adult health/medical surgical
 - Anesthesia
 - 3. Community health/public health
 - 4. Critical care
 - 5. Family
 - Geriatric/gerontology
 - Maternal-child/parent-child
 - 8. Neonatal
 - 9. Nurse-midwifery
 - 10. Obstetric/gynecology
 - Occupational health
 - 12. Oncology
 - 13. Pediatric
 - 14. Psychiatric/mental health
 - Rehabilitation
 - 16. School health
 - 17. Women's health
 - 18. Other (Specify)

6e. Are you currently certified by a <u>national</u> accrediting body for this advanced practice?

1. Yes 2. No → (Skip to 7)

- Are you certified as a: (Circle appropriate number)
 - 1. Certified registered nurse anesthetist
 - 2. Certified nurse-midwife
 - Clinical specialist in adult psychiatric/mental health
 - Clinical specialist in child, adolescent psychiatric/mental health
 - Clinical specialist in community health nursing
 - 6. Clinical specialist in gerontological nursing
 - 7. Clinical specialist in medical-surgical nursing
 - 8. Neonatal nurse clinician practitioner
 - 9. Adult nurse practitioner
 - 10. Family nurse practitioner
 - 11. Gerontological nurse practitioner
 - 12. Ob-Gyn nurse practitioner
 - 13. Pediatric nurse practitioner
 - 14. School nurse practitioner
 - 15. Other (Specify)
- 6g. What is the name of the national accrediting body?
- 7a. Are you currently enrolled in a formal education program leading to an academic degree with a <u>nursing or nursing-related major</u>?



- 7b. Are you considered a full-time or part-time student?
 - 1. Full-time student
 - 2. Part-time student

- 7c. What degree are you currently working toward in this program? (Circle only one number)
 - 1. Associate Degree
 - Baccalaureate
 - 3. Master's
 - 4. Doctorate
 - Other (Specify)
- 7d. How are your tuition and fees being financed? (Circle all that apply)
 - 1. Personal and family resources
 - Employer tuition reimbursement plan (including Veterans Administration employer tuition plan)
 - Federal traineeship, scholarship, or grant
 - 4. Federally assisted loan
 - State or local government loan or scholarship
 - 6. Non-government scholarship, loan, or grant
 - 7. University teaching or research fellowship
 - 8. Other sources (Specify)

SECTION B: EMPLOYMENT STATUS

 Were you employed in nursing as of March 25, 1992? (SEE NOTE BELOW)

NOTE: EMPLOYMENT ALSO INCLUDES:
BEING ON A TEMPORARY LEAVE OF
ABSENCE FROM YOUR NURSING
POSITION; ON VACATION; ON SICK
LEAVE; OR A NURSE DOING PRIVATE
DUTY OR WORKING THROUGH A
TEMPORARY EMPLOYMENT SERVICE
AND NOT ON A CASE AT THE MOMENT.

ř	-1.	Yes		
1	2.	No -	→ (Ski	p to 20)
4				

The following questions 9-18 refer to your principal employment setting and nursing position as of March 25, 1992. If you held more than one position in nursing, provide your answers in terms of what you consider your principal nursing position during your regular work year. For example, if you hold more than one nursing position (e.g., day/night or winter/summer), consider the principal nursing position as the one at which you spend the greater amount of time.

What was the location of employment on March 25, 1992? (SEE NOTE BELOW)

NOTE: If you were not employed in a fixed location (e.g., you were a private duty nurse or worked through a temporary employment service); consider the area where you spend most of your working time as your location of employment.

County: _				
State (or o	ountry	if not l	J.S.A.):	
50	- 5			

- In your principal nursing position are you: (Circle only one number)
 - An employee of the facility for which you are working
 - Employed through a temporary employment service agency
 - 3. Self Employed

11. Which one of the following settings best describes the TYPE OF SETTING in which you were working on March 25, 1992 in your principal nursing position? (If your employment is that of a private duty nurse or you work through a temporary employment service, circle the <u>one</u> setting in which you spend most of your working time.)

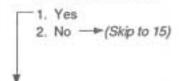
Hos	pital (Exclude nursing home units in hospitals but	Sch	ool Health Service
inclu	de all clinics and other services of the hospital)	510	Public school system
		520	Private or parochial elementary or
110	Non-federal, short-term hospital, except	1000000	secondary school
	psychiatric (for example acute care hospital)	530	College or university
120	Non-federal, long-term hospital, except psychiatric	540	Other (specify)
130	Non-federal psychiatric hospital	Occi	upational Health (Employee Health
140	Federal Government Hospital	Serv	
150	Other type of hospital (specify)		Private Industry
917	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	620	Government
		1.5	Other (specify)
Nurs	ing Home/Extended Care Facility	1000	
210	Nursing home unit in hospital	Amb	ulatory Care Setting
220	Other nursing home		Solo practice (physician)
230	Facility for mentally retarded		Solo practice (nurse)
240	Other type of extended care facility		Partnership (physicians)
	(specify)		Partnership (nurses)
			Group practice (physicians)
Nurs	ing Education		Group practice (nurses)
310	LPN/LVN program		Partnership or group practice
320	Diploma program (RN)	1	(mixed group of professionals)
330	Associate degree program (RN)	750	Freestanding clinic (physicians)
340	Baccalaureate and/or higher degree nursing		Freestanding clinic (nurses)
350	Other (specify)	10000000	Ambulatory surgical center (non-hospital based
	2.40 (4.00)		Dental practice
Publi	c Health/Community Health Setting		Health Maintenance Organization (HMO)
400	Official state health department		Other (specify)
405	Official state mental health agency	11249200	
410	Official city or county health department	Othe	
415	Combination (official/voluntary) nursing service	910	Central or regional Federal agency
420	Visiting nurse service (VNS/NA)		State Board of Nursing
425	Other home health agency (non-hospital based)		Nursing or health professional membership
430	Community mental health facility		association
	(including freestanding psychiatric outpatient	940	Health planning agency
	clinics)		Prison or jail
435	Community/neighborhood health center	E-STREET, THE	Insurance company (review/claims)
440	Planned Parenthood/family planning center		Other (specify)
445	Day care center		
450	Rural health care center		
455	Retirement community center		
460	Hospice		
465	Other (specify)		

- Which one of the following titles best corresponds to the position title for your principal nursing position? (Circle only one number)
 - 01 Administrator or assistant administrator
 - 02 Certified nurse anesthetist (CRNA)
 - 03 Charge nurse
 - 04 Clinical nurse specialist
 - 05 Consultant
 - 06 Dean, director, or assistant/associate director of nursing education
 - 07 Director or assistant/associate director of nursing service
 - 08 Discharge planner
 - 09 General duty nurse
 - 10 Head nurse or assistant head nurse
 - 11 Infection control nurse
 - 12 In-service education director or instructor
 - 13 Instructor
 - 14 Insurance reviewer
 - 15 Nurse clinician
 - 16 Nurse coordinator
 - 17 Nurse-midwife
 - 18 Nurse practitioner
 - 19 Patient care coordinator
 - 20 Private duty nurse
 - 21 Professor or assistant/associate professor
 - 22 Public health nurse
 - 23 Quality assurance nurse
 - 24 Researcher
 - 25 School nurse
 - 26 Staff nurse
 - 27 Supervisor or assistant supervisor
 - 28 Team leader
 - 29 No position title
 - 30 Other (Specify)

13a. For your principal nursing position, approximately what percentage of your time is spent in the following areas during a usual work week? Please make sure the total equals 100%.

	Percent
Administration	%
Consultation with agencies and/or professionals	%
Direct patient care, not including staff supervision	%
Research	%
Supervision	%
Other (Specify)	%
TOTAL MUST EQUAL	100_%
	Consultation with agencies and/or professionals

13b. Does your principal nursing position involve direct patient care in a hospital setting during a usual work week?



14a. In what type of unit do you work more than half of your patient care time during a usual work week? (Circle only one number)

- 1. Intensive care bed unit
- Step-down, transitional bed unit
- General/specialty (other than intensive care or step down) bed unit
- 4. Outpatient department
- Operating room
- Post operative recovery room
- 7. Labor/delivery room
- 8. Emergency room
- Home health care
- 10. Hospice unit
- 11. Other specific area (Specify)
- No specific assigned type of area

14b. What type of patients are primarily treated in the hospital unit in which you work? (Circle only one number) 1. Chronic care 2. Coronary care 3. Neurological 4. Newborn 5. Obstetrics/gynecologic 6. Orthopedic 7. Pediatric	17. Approximately how many weeks are there in your normal work year for your principal nursing position (include in your work year paid vacation, etc.) Note: If you are self-employed or do not work a routine schedule, report the estimated number of weeks you expect to work in 1992. Weeks
Psychiatric Rehabilitation	18. PLEASE SPECIFY THE ANNUAL EARNINGS FOR YOUR PRINCIPAL POSITION ONLY.
 Basic medical/surgical (or specialty areas not specified above) Work in multiple units not specifically specialized 	What is your gross annual salary before deductions for taxes, social security, etc? If you do not have a set annual salary (for example, you are part-time, private duty, or self-employed), provide an estimate of your annual earnings for 1992.
15. If you were EMPLOYED BY AN INSTITUTION OR AGENCY and were scheduled to work for the normal "full" work week throughout the normal work year, as defined by the agency, circle category "1". If you worked less than the normal "full" work week and/or less than the normal work year, circle either "2" or "3", whichever is applicable.	Annual earnings: \$ 19a. Do you hold more than one position in nursing for pay? 1. Yes
If you were SELF-EMPLOYED and are generally available for work throughout the year during what would constitute a normal "full" work week, circle category "1". If you restrict yourself to work only a segment of the work week and/or year, circle either "2" or "3", whichever is applicable.	2. No → (Skip to 23a) 19b. In your other nursing position(s) for pay, do you: 1. Work as an employee of the facility 2. Work through a temporary employment
Do you:	service agency
 Work an entire calendar year or school or academic year on a full-time basis? 	Work in a self-employed capacity?

- 2. Work an entire calendar year or school or academic year on a part-time basis?
- 3. Work only part of the normal work year on either a full or part-time basis?
- 16a. Approximately how many hours are you usually scheduled to work during a normal work week (as defined by the agency) at your principal nursing position? If you do not work on a routine schedule, how many hours do you usually work during a week at your principal nursing position?

				н	Ю	u	Ľ
-			-		-	_	

16b. How many hours did you actually work during the week beginning on March 23, 1992? (Include overtime but exclude holidays, sick leave, vacation time not worked.)

	# E
	HOUR

- Home health
- Hospital staff
- Nursing home staff
- Private duty nursing
- Teaching
- Patient consultation
- Consultation
- 8. Research
- Other (Specify)

19d.	What is the average number of hours per week you spend in your other nursing position(s)? Please also provide an estimate of the total number of weeks in 1992 that you will spend in this other nursing position(s). Note: If you are self-employed or do not work a routine schedule, report the estimated number of weeks you expect to work in 1992. Average hours per week	SECTION C: EMPLOYMENT STATUS OF RNS NOT EMPLOYED IN NURSING 20. How long has it been since you last worked for pay as a registered nurse? 1. Never worked as a registered nurse 2. Less than a year 3. One year or more Indicate number of years
19e.	How many hours did you actually work in your other nursing position during the week beginning on March 23, 1992? If you did not work in your other nursing position(s) during that week, please enter "0".	21a. Are you employed in an occupation other than nursing? — 1. Yes 2. No → (Skip to 22a)
		21b Assurance considered a full time or part-time
19f.	For your other nursing position(s), please provide an estimate of the total annual earnings for 1992. Note: If you are self-employed or do not work a routine schedule, report the estimated amount you expect to earn in 1992. Estimated annual earnings \$	21b. Are you considered a full-time or part-time employee? 1. Full-time 2. Part-time 21c. Are you employed in a health-related agency or position? 1. Yes 2. No
	Onthe To do Lottle To do	21d. What is the reason(s) you are not working in a nursing position? (Circle all that apply)
		Difficult to find a nursing position Hours more convenient in other position Better salaries available in current type of position Concern about safety in health care environment Inability to practice nursing on a professional level Find current position more rewarding professionally My nursing skills are out-of-date Other (please specify)

22a.	Are you actively seeking employment as a registered nurse (e.g., making inquiries as to availability of employment, answering advertisements, having interviews)?
-	1 Vac

- 22b. How many weeks have you been actively seeking a nursing position?
 - 1. Less than a week
 - One week or more
 Indicate number of weeks
- 22c. Are you looking for a full-time or part-time nursing position?
 - 1. Full-time
 - 2. Part-time
 - 3. Either

SECTION D: PRIOR NURSING EMPLOYMENT STATUS

- 23a. Were you employed in nursing one year ago on March 25, 1991?
 - 1. Yes
 2. No → (Skip to 24)
- 23b. In your principal nursing position at that time, if you were EMPLOYED BY AN INSTITUTION OR AGENCY and were scheduled to work for the normal "full" work week throughout the normal work year, as defined by the agency, circle category "1". If you worked less than normal "full" work week and/or less than the normal work year, circle either "2" or "3", whichever is applicable.

If you were SELF-EMPLOYED and were generally available for work throughout the year during what would constitute a normal "full" work week, circle category "1". If you restricted yourself to work only a segment of the work week and/or year, circle either "2" or "3", whichever is applicable.

In your nursing position of one year ago did you:

- Work an entire calendar year or school or academic year on a full-time basis?
- Work an entire calendar year or school or academic year on a part-time basis?
- Work only part of the normal work year on either a full- or part-time basis?
- 23c. What was the location of your principal position on March 25, 1991? If you were not employed in a fixed location (e.g., you were a private duty nurse), consider the area where you spent most of your working time as your location of employment.

City:			
County:			
State (or country	f not U	I.S.A.):	
ZIP Code:	7		

23d. Which one of the following settings best describes the type of employment setting of your principal position in which you worked on March 25, 1991?

Hosp	oltal (Exclude nursing home units in hospitals but	Sch	ool Health Service
includ	de all clinics and other services of the hospital)	510	Public school system
	W 350	520	Private or parochial elementary or
110	Non-federal, short-term hospital, except		secondary school
	psychiatric (for example acute care hospital)	530	College or university
120	Non-federal, long-term hospital, except	540	Other (specify)
	psychiatric	7.0000.4	Control of the Control
130	Non-federal psychiatric hospital	Occ	upational Health (Employee Health
140	Federal Government Hospital		rice)
150	Other type of hospital (specify)	610	Private Industry
		620	Government
		630	Other (specify)
Nurs	ing Home/Extended Care Facility	365	
210	Nursing home unit in hospital	Amb	oulatory Care Setting
220	Other nursing home	1	Solo practice (physician)
230	Facility for mentally retarded	715	Solo practice (nurse)
240	Other type of extended care facility	720	Partnership (physicians)
	(specify)		Partnership (nurses)
	1.M 11/1/2	1	Group practice (physicians)
Nurs	ing Education	735	Group practice (nurses)
310	LPN/LVN program		Partnership or group practice
320	Diploma program (RN)		(mixed group of professionals)
330	Associate degree program (RN)	750	Freestanding clinic (physicians)
340	Baccalaureate and/or higher degree nursing	755	Freestanding clinic (nurses)
350	Other (specify)	10.000	Ambulatory surgical center (non-hospital base
	17001001 A15 0001 55 0	770	[802] [1] [1] [2] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2
Publ	ic Health/Community Health Setting	780	Health Maintenance Organization (HMO)
400	Official state health department	1000	Other (specify)
405	Official state mental health agency	25,050	
410	Official city or county health department	Othe	er
415	Combination (official/voluntary) nursing service		Central or regional Federal agency
420	Visiting nurse service (VNS/NA)		State Board of Nursing
425	Other home health agency (non-hospital based)		Nursing or health professional membership
430	Community mental health facility	0.000	association
	(including freestanding psychiatric outpatient	940	Health planning agency
	clinics)	100000000000000000000000000000000000000	Prison or jail
435	Community/neighborhood health center	960	
440	Planned Parenthood/family planning center	970	
445	Day care center	23.00	Section of the Control of E
450	Rural health care center		
455	Retirement community center		
460	Hospice		
465	Other (enacify)		

SECTION E: GENERAL INFORMATION We would like you to answer some additional questions for use in the statistical interpretation of your responses. 24. What is your sex? 1. Female 2. Male 25. What is your year of birth?

- What is your racial/ethnic background? (Circle only one number)
 - 1. Hispanic
 - American Indian or Alaskan Native
 - Asian or Pacific Islander
 - 4. Black, not of Hispanic origin
 - 5. White, not of Hispanic origin
- 27. What is your current marital status?
 - 1. Now married
 - 2. Widowed, divorced, separated
 - Never married
- How old are the children who live at home with you? (include all children who live with you 6 months of the year or more) (Circle only one number)
 - No children at home
 - 2. All less than 6 years old
 - 3. All 6 years old or older
 - 4. Some less than 6 and some 6 or over
- 29. Which category best describes how much income you, or if you are currently married, you and your spouse together anticipate earning during 1992? (Include your annual employment earnings before deductions, your spouse's annual employment earnings before deductions, if married; and all other income, including alimony, child support, dividends, royalties, interest, social security, retirement, etc.)
 - \$15,000 or less
 - 2. 15,001 to 25,000
 - 3. 25,001 to 35,000
 - 4. 35,001 to 50,000
 - F. FO.0011 DE,000
 - 5. 50,001 to 75,000
 - 6. 75,001 to 100,000
 - 7. 100,001 to 150,000
 - 8. More than \$150,000

30.	Where were you living on March 25, 1992?
	City:
	County:
	State (or country, if not U.S.)
	ZIP Code:
31a.	Did you reside in the same city on March 25, 1992, and on March 25, 1991?
Г	1. Yes —→ (Skip to 32) -2. No
₩ 31b.	Where were you living on March 25, 1991?
10	City:
	County:
	State (or country, if not U.S.)
1	ZIP Code:
22 1	When were you issued your first U.S. license

- 32. When were you issued your first U.S. license (by one of the 50 States or the District of Columbia) to practice as a <u>registered nurse</u> and what State issued this license to you:
- 32a. In what year did you receive your first U.S. license?
 - 1. 1991 6. 1986 11. 1981 2. 1990 7. 1985 12. 1980 3. 1989 8. 1984 13. Prior to 1980 4. 1988 9. 1983 5. 1987 10. 1982
- 32b. Which State issued you your first license?

37.0	For office use	

Please note that the following question (Q.33) is very important in order to determine how many nurses in the country your answers may represent. As soon as this determination is calculated and the proper statistical code assigned, your name(s) and registration number(s) will no longer be associated with the other information in this questionnaire.

33. In the space provided below, please provide the following Information:

Column A-List all states in which you are now actively licensed.

Column B-List the permanent number of your certificate of registration or license for each state you listed.

Column C-List your complete name as it appears on each license, or circle "same" if it is the same as on questionnaire label.

A. State	B. Permanent number on certificate of	Name as it app	C. pears on the regis	stration	FOR OFF	ICE USE
of Licensure	registration or license	or license, or g	circle "same" at r ame as on front o	ight of	D.	E.
1.		Last	First	MI (same)		
2.		Last	First	MI (same)		
3.		Last	First	MI (same)		
4.		Last	First	MI (same)		
5.		Last	First	MI (same)		
6.		Last	First	Mi (same)		
7.		Last	First	MI (same)		
8.		Last	First	MI (same)		
9.		Last	First	MI (same)		
10.		Last	First	MI (same)		

What le w	our telephone number?		
Area Code			
one numbe		appear on the label of this questi	onnaire, correct? (Circle o
 Yes No (Ple 	ase indicate correct name a	and address)	
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AS SOON AS YOUR ANSWERS HAVE BEEN PROCESSED, THIS INFORMATION WILL NO LONGER BE

THANK YOU VERY MUCH FOR YOUR HELP. PLEASE RETURN THE QUESTIONNAIRE IN THE ENCLOSED SELF-ADDRESSED ENVELOPE.

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